

Cherokee Strip Regional Heritage Center Authorization for Volunteer Background Check

During the application process and at any time during the tenure of my volunteer service with the Cherokee Strip Regional Heritage Center, I hereby authorize the Cherokee Strip Regional Heritage Center and Oklahoma Historical Society to procure a consumer report, which I understand may include information regarding my character, general reputation, or personal characteristics. This report may be compiled with information from courts record depositories, departments of motor vehicles, past or present employers and educational institutions, governmental occupational licensing or registration entities, business or personal references, and any other source required to verify information that I have voluntarily supplied. I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification to the extent such investigation includes information bearing on my character, general reputation, or personal characteristics.

If a conviction record is found on an individual submitting an application, the applicant will be considered individually based on the following:

- Length of time since the conviction
- Nature of the crime
- Relationship between the job to be performed and the crime committed
- Number of convictions
- Rehabilitation efforts
- Subsequent employment history

Based on these criteria, possibility of volunteer service and placement will be determined by the administration of the Cherokee Strip Regional Heritage Center.

By signing below, you agree to the background check. You may request a copy of the check at any time. If you choose not to agree to the background check, you forfeit your application to the Cherokee Strip Regional Heritage Center Volunteer Services Program.

Volunteer Approval _____ Date _____

Please provide the following information. PRINT

First _____ Middle _____ Last _____

Suffix _____ Maiden Name _____

Any other name(s) you have gone by _____

Current Address _____

Any other addresses during the last 7 years _____

City/State/Zip _____

County _____

SSN _____ - _____ - _____ Date of birth _____ / _____ / _____

Phone #() _____ Gender Male Female

Driver's License **state** and **number** _____