

**INTENT/AUTHORIZATION TO OBTAIN BACKGROUND REPORT FOR CERT
VOLUNTEERING**

NOTICE

The City of Grand Island conducts applicant screening and criminal background efforts that include an investigative report, which may include inquiries into an applicant's character, general reputation, personal characteristics, and mode of living. The report may involve personal interviews with employers and educational institutions.

Additionally, a criminal and civil records history, driver history, educational verification, and work history may be ordered. A volunteer has the right to request a complete and accurate disclosure of the nature and scope of the investigative report requested. Your request must be made in writing within a reasonable amount of time from the receipt of this notice. You also may have additional rights according to state and local laws.

AUTHORIZATION

I hereby certify that I have been informed as to the duties of the volunteer position for which I am applying. Furthermore, I certify that the information I have thus far provided to the City of Grand Island is accurate and complete, to the best of my knowledge. I understand that falsification, misrepresentation or omission of any material or information I have supplied may be used to disqualify me from CERT membership. I understand that the City of Grand Island will verify information given on applications, and I authorize it to do so. I also authorize the City of Grand Island and/or its agents, to make whatever inquiries it considers appropriate in order to obtain this verification. I authorize any individuals and/or agencies contacted by the City of Grand Island or its agents to furnish all necessary information that may be requested, including consumer credit and/or investigative consumer reports. I release the City of Grand Island, its agents and any person or institution that provides the City of Grand Island with information pertaining to this application, from any and all liability for adverse action or damage that may result from the investigation, disclosure, or use of such information.

This authorization shall remain in effect during the course of participation in CERT and may be used in connection with future decisions concerning my involvement in CERT.

I have read and understand the above notice and I hereby authorize the obtaining and disclosure of such information.

Applicant's Printed Name: _____

DOB: _____

Applicant's Signature: _____

Date: _____