

## Consent to Background Check

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

DOB: \_\_\_\_\_

Authorizing Statute: UCA 53G-11-402

I, \_\_\_\_\_, understand that my personal information including name, DOB, SSN, and fingerprints will be used for the purpose of conducting a criminal history records search through any applicable state and federal databases. This information will be used by Lincoln Academy to determine my eligibility for volunteering. My personal information and fingerprints may be retained for ongoing monitoring and comparison against future submissions to the state, regional or federal database and latent fingerprint inquiries. Lincoln Academy will establish procedures to ensure removal of my fingerprints from applicable state and federal databases when I am no longer under their purview as required UCA 53G-11-402 and by UCA §53-10-108. I understand that I may request to review any results of this inquiry and understand that UCA 53-10-108 allows Lincoln Academy to provide a copy of those results to me. I understand that any results provided to me can only be used for the purpose of reviewing, responding to, or challenging the accuracy of the information. I understand that if I misuse any information provided to me I may be subject to criminal penalties under UCA §53-10-108(12)(a). Before a determination is made, I understand that I will be afforded a reasonable amount of time to challenge the completeness and accuracy of the record through the procedures established by Lincoln Academy as well as contacting the Utah Bureau of Criminal Identification (Utah Criminal History Results), the State Identification Bureau (SIB) associated with any results that are outside of Utah, or the Federal Bureau of Investigation (Nationwide Criminal History Response Information). Until the completion of the background check, I understand I may be denied unsupervised access to children, vulnerable adults or to the privilege in which the background check pertains to. I will provide a list of all criminal convictions which contains a description of the crimes and the particulars of the convictions. I have read the attached Privacy Statement and understand my rights according to this statement.

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Self Disclosure**

Date of Arrest:

Arresting Agency:

Charges:

Court of Appearance:

Conviction Disposition:

Sentencing and Probation: