

## **BACKGROUND VERIFICATION RELEASE FORM**

# Dallas Children's Advocacy Center Board Members, Staff, Volunteers, Vendors or Contractors

**Purpose:** The purpose of this form is to grant representatives of authorized volunteer organizations permission to request, on the behalf of potential and current volunteers, employees, and board members:

- 1. Criminal history check from VeriFYI
- 2. Background check from the Texas Department of Family and Protective Services (DFPS) Central Registry of Child Abuse and Neglect

**Directions:** The subject of the background check or applicant reads and completes Section 1-3, and submits this form to a Dallas Children's Advocacy Designee noted below:

**Employee Designee**: Stephanie Adams, Chief People Officer @ <a href="mailto:sadams@dcac.org">sadams@dcac.org</a> **Volunteer Designee**: Liz Robinson, Director of Advancement @ <a href="mailto:lrobinson@dcac.org">lrobinson@dcac.org</a> **Intern Designee**: Julie Hill, Payroll and Benefits Coordinator @ <a href="mailto:jhill@dcac.org">jhill@dcac.org</a>

A note to the applicant: The applicant is responsible for ensuring the information provided below by the subject in **Section 1** is complete and accurate.

	SECTION 1:	: PAYMENT					
I acknowledge that I am responsible as a volunteer to pay the \$10 fee associated with processing the Background Verification Release Form. The fee is per person and your background check will not be processed until payment is made. Please use the link below to complete payment:							
Background Verification Release Payment							
☐I acknowledge that this DCAC should anything cha	-	d for three years and it is	my responsibility to alert				
□I acknowledge that DCA have charges pending for neglect, or related acts tha accept volunteers if they hat to Believe (RTB) for sexual	a felony or misdemeanor at would pose a risk to child ave a Department of Famil	involving a sex offense, value or the DCAC program	violent act, child abuse or 's credibility. DCAC will not				
SECTION 2: SUBJECT OF THE BACKGROUND CHECK							
PLEASE PRINT LEGIBLY	AND LARGE: The inform	nation in this section m	ust be provided by the				
subject/applicant of the ba	_	e check is conducted. Miss	ing information may result				
in delays to obtaining information.							
First Name:	Middle Name:	Last Name:	Maiden Name:				
Alternate First Name:	Alternate Middle Name:	Alternate Last Name(s):					

Birthdate:	Sex:	Race:	Ethnicity:  Hispanic D Other					
Social Security #:		Driver's License #						
		State:						
Email Address:		Phone Number:						
Place of Birth:		Country:						
Position Applied for:								
CURRENT ADDRESS:								
Street:	City/State:		Zip:					
County:	How long have y	How long have you lived here?						
	PREVIOUS	ADDRESSES:						
Street:	City/State:		Zip:					
County:	How long did you	How long did you live here?						
PREVIOUS ADDRESSES:								
Street:	City/State:		Zip:					
County:	How long did you	How long did you live here?						

#### **SECTION 3: THIS SECTION MUST BE SIGNED BY THE APPLICANT**

### This section of the form must be signed by the applicant of the background check.

- I am the person listed above in Section of this form. The information in this document is correct and I am a prospective or current volunteer, board member, employee, contractor, or vendor of DCAC. I agree to update DCAC of any changes to the information above.
- I grant permission to DCAC to request a Child Abuse/Neglect Central Registry and a Texas Department of Public Service Criminal history check as well as any subsequent checks so long as I am active with the agency.
- I authorize DFPS and VERIFYI to transmit the results of this background check via email or review the information on their website. DFPS and VERIFYI cannot guarantee that information transmitted electronically is secure and accessible only to approved parties.
- I understand that the information that I am providing will be part of any request and that providing false information is a violation of Texas Penal Code Section 37.10.
- I hereby authorize VeriFYI and or its Service Provider to request and receive any an all background
  information about me or concerning me, including but not limited to my Criminal History, Social Security
  Number Trace including a consumer report under the Fair Credit Reporting Act, 15 U.S.C 1681, Driving
  Record, Employment History, Military Background, Civil Listings, Educational Background, Professional
  License from an Individual, Corporation, Partnership, Law Enforcement Agency, any other entities
  including Present and Past Employers.
- I further release and discharge VeriFYI and their Service Provider and all of their Subsidiaries, Affiliates,
  Officers, Employees, Contract Personnel, or Associates from any and all claims and liability arising out of
  any request for information or records pursuant to this authorization, procurement of an investigative
  consumer report and understand that it may contain information about my character, general reputation,
  personal characteristics, and mode of living, whichever are applicable.

- I understand that I have the right to make written request within a reasonable period of time to VeriFYI for additional information concerning the nature and scope of the investigation. I acknowledge that I have voluntarily provided the above information for employment, volunteer, vendor, contractor of board purposes, and I have carefully read and understand this authorization.
- I hereby give permission to the Dallas Children's Advocacy Center, aka DCAC, to inquire about my records, qualifications, and/or character. I understand this check may be made by phone or in writing and could include employers, organizations, personal references, law enforcement agencies, and the Texas Department of Family and Protective Services
- The results of these records checks will be confidential and the information in the DCAC files. I understand
  that DCAC has the right to periodically check these records as deemed necessary and appropriate and that
  employees, volunteers, board members, vendors or contractors must clear these record checks as
  conditions of continued employment or volunteer service with the agency. Failure to be cleared by such
  checks will result in the withdrawal of any employment or volunteer service offer or can result in
  immediate separation of employment.
- This form is valid throughout your employment and/or volunteerism with DCAC.

Applicant Signature:	Date:

#### SECTION 4: NOTE TO THE APPLICANT OR SUBJECT OF THE BACKGROUND CHECK

As required by the Texas Family Code 261.002, DFPS maintains a central registry of reported cases of children abuse and neglect. The DFPS Central Registry consists only of information gathered during Child Protective Services (CPS), Child Care Licensing (CCL), and Adult Protective Services (APS) facility investigations of child abuse and neglect in cases that were given a disposition of "reason to believe" for CPS and CCLS cases or "confirmed and validated" for APS cases, and the person had a role of designated perpetrator or sustained perpetrator. (Please note: Cases involving adult victims are not involved in the DFPS Central Registry).

In addition, you will not clear the Central Registry check if you are involved as an alleged perpetrator in an open child abuse or neglect investigation being conducted by DFPS. A new Central Registry check may be requested at the conclusion of the investigation to determine whether you have been listed as a designated perpetrator on the Central Registry of Child Abuse and Neglect.

As the subject of the request, you have the right to review the results of this check. If Central Registry history is found that identifies you as a person who has been found to have based or neglected a child, DFPS will only send the results directly to you via mail or email. You have the option to share these findings with DCAC.

The criminal history from DPS will include all Texas based arrests and dispositions, including both convictions and cases with unknown dispositions. In some case the search may produce juvenile criminal history results.

Unknown disposition information found may not be the most up to date information available. If the results returned from PDS include an unknown disposition, contact the court of jurisdiction and request an official certified copy of the disposition. The official certified copy and an Error Resolution Form should be sent to DPS at PO Box 4143, Austin, Texas 78765 in order for the person's criminal history to be updated by DPS.

DCAC OFFICE USE ONLY							
VeriFYI:	☐ Approved	□ NOT Approved	Initials:	Date:			
DFPS:	☐ Approved	□ NOT Approved	Initials:	Date:			
Quest:	☐ Approved	□ NOT Approved	Initials:	Date:			