



**FLORIDA  
INTERNATIONAL  
UNIVERSITY**

**BACKGROUND RECORD CHECK AUTHORIZATION**

I, \_\_\_\_\_, am interested in providing volunteer services to Florida International University. I voluntarily authorize Florida International University and/or its agents to conduct a background record check in connection with my application for providing volunteer services and, if engaged, at any time during my volunteerism with FIU. I specifically authorize FIU to obtain consumer reports from consumer reporting agencies and consent to the release of such information to FIU, investigators, human resources staff, and other authorized employees of the State of Florida. This consent shall continue to be effective during my service as a volunteer.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Address (Street number and name, City or Town, State, Zip code)

List any and all names you have been known by: \_\_\_\_\_

**BACKGROUND INFORMATION**

Have you ever been convicted of a criminal offense as an adult?

Yes             No            If yes, attach a full, detailed explanation

Have you ever pleaded guilty or NOLO CONTENDERE to, or been convicted of, a misdemeanor or felony?

Yes             No            If yes, attach a full, detailed explanation

Have you ever had the adjunction of guilt withheld to a crime which is a felony or a misdemeanor?

Yes             No            If yes, attach a full, detailed explanation

Have you been convicted of a felony after October 1, 1990, for the sale of trafficking in, or conspiracy to sell or traffic in a controlled substance as defined in Chapter 898, Florida Statutes?

Yes             No            If yes, attach a full, detailed explanation

---

I am aware that any omissions, falsifications, or misrepresentations above or in any supplement hereto may disqualify me for consideration and/or may be grounds for immediate termination of my volunteer position. I understand that any information I give may be investigated as allowed by law.

I understand that if I am selected to serve as an FIU Volunteer, I will be responsible for conducting myself in all activities relating to FIU in the most ethical and professional manner and in the best interests of this University. In fulfilling my assigned responsibilities I agree to adhere to all applicable Federal, State, and University policies, rules and regulations. I understand that this Application for Volunteer is a public record.

I certify that to the best of my knowledge and belief all the statements contained herein and on any attachments are true, correct, complete, and made in good faith.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Legal Guardian (Minors)

\_\_\_\_\_  
Date

### **FAIR CREDIT REPORTING ACT DISCLOSURE NOTICE**

The position for which you wish to volunteer may require that the person successfully pass a background (consumer report and/or criminal background) check. This background check may be conducted prior to your being permitted to volunteer. After a successful background (consumer report and/or criminal background) check is received, a report date will be scheduled.

The report may include information bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, and/or your mode of living. Information obtained in consumer reports may include criminal background information, motor vehicle driving history, prior employment, military service, credit history, and educational records. This report will be obtained for volunteer service purposes only.

Please sign below, indicating your authorization for Florida International University and/or its agents to conduct a background record check and obtain a consumer report in conjunction with your application to volunteer at Florida International University. In the event that FIU considers any information in the consumer report when making an adverse volunteer services-related decision affecting you, you are entitled to request information regarding the consumer reporting agency, a copy of the consumer report and a copy of your rights under the Fair Credit Reporting Act (FCRA).

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date