

**CSC of Eastern Hancock County**  
**Volunteer Background Investigation for 2019-20 School Year**

Updated 4-15-19

**All volunteers for CSC of Eastern Hancock field trips, clubs, classroom events, and any situation where a volunteer would be working directly with a student will now require a YEARLY background check to be completed. You only need to fill out ONE form per person.**

This may include court, county, state, federal and national reporting for criminal and sexual offenses. Reporting will be done through either/both of the following organizations:

- Safe Hiring Solutions LLC, P.O. Box 295, Danville, IN 46122 888-215-8296
- Indiana State Police, Central Repository, 100 N. Senate Ave., Indianapolis, IN 46204

Before any adverse action is taken, based in whole or in part of the information contained in the consumer report, you will be provided a copy of the report, the name, address and the telephone number of the reporting agency, a summary of your rights under the Fair Credit Reporting act, as well as additional information on your rights under the law.

**AUTHORIZATION**

By signing below, I, \_\_\_\_\_, hereby voluntarily authorize CSC of Eastern Hancock County to obtain either a consumer or an investigative consumer report about me from a consumer reporting agency and to consider this information when making decisions regarding my volunteer status. I understand that I have rights under the Fair Credit Reporting Act, including rights discussed above. This report may be delivered in either written or electronic form.

\_\_\_\_\_  
Print **LEGAL** Name (first, middle, last)

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

\_\_\_\_\_  
Date of Birth (MM/DD/YYYY)

\_\_\_\_\_  
Drivers License Number

\_\_\_\_\_  
Drivers License State

Gender: Male  Female

Race: Asian/Pacific  Black  American Indian/Alaskan  Multi-Racial  White  Unknown

**(NOTE: These are the ONLY categories provided by the Indiana State Police. Please select one.)**

Any other names I have been known by (Ex: maiden name): \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Previous Addresses (Last 7 Years) \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

I will be volunteering for: (include ALL student names) \_\_\_\_\_

Telephone number (to reach you if there are any questions) \_\_\_\_\_

Please return application to: **Administration Office/CSC of Eastern Hancock County**  
**10370 E. 250 N.**  
**Charlottesville, IN 46117**

**or scan and email to Tracy McCarty at [tmccarty@easternhancock.org](mailto:tmccarty@easternhancock.org)**