

Columbus Arts Council Consent to Perform Criminal Records Check

I hereby give my consent to the Columbus Arts Council (CAC) _____ to perform a criminal records check as required for the volunteer position for which I have applied.

I understand that I do not have to agree to this records check, but that my refusal may exclude me from consideration for teaching positions at the CAC.

I understand that the CAC _____ will limit the information it collects to that needed to determine my suitability for particular types of volunteer work, that it will keep all such information confidential and destroy documents containing my Social Security number at the time it makes a decision to accept me as a volunteer.

Applicant's printed name: _____

Signature: _____ Date: _____

(Keep top of this page for files)

Criminal Records Check Information

Date of birth: _____

Social security number: _____

Driver's license number: _____

Other name(s) you may be known as (e.g., maiden name, birth name, etc.):

(Destroy bottom of this page when acceptance decision is made)