

## Declarations

Catholic Charities of the Diocese of Raleigh, Inc. appreciates your willingness to share your faith, gifts and skills. Providing safe and secure programs for our members is of utmost importance to us. The information gathered in this application is designed to help us provide the highest quality Catholic programs for the people of our community. Please read and initial each of the statements below.

\_\_\_\_\_ I declare that all statements contained in this application are true and that any misrepresentation or omission is cause for rejection of my application or dismissal from my position.

\_\_\_\_\_ I agree to observe all of **Catholic Charities** guidelines and policies for the program in which I am applying, especially the Code of Conduct for Church Personnel for the Diocese of Raleigh.

\_\_\_\_\_ I understand that the **Catholic Charities** has a ZERO TOLERANCE FOR ABUSE and takes all allegations of abuse seriously. I further understand that **Catholic Charities** cooperates fully with the authorities to investigate all cases of alleged abuse. Abuse of minors or vulnerable adults is grounds for immediate dismissal and possible criminal charges.

\_\_\_\_\_ I understand that I can withdraw from the application process at any time.

\_\_\_\_\_ I understand and agree that false statements and/or omissions regarding past conduct and/or present situations may be grounds for denial of the application to provide employment and/or volunteer services.

\_\_\_\_\_ I hereby authorize **Catholic Charities** to conduct a personal and professional background check for the purposes of my application at **Catholic Charities**. **Catholic Charities** may contact any references, past and current employers, church, youth organizations, agencies where volunteer service has been completed, and any individual or organization which might be relevant to my desired position. I hereby release all of the above stated persons from any and all liability for damages that might occur during **Catholic Charities'** contact with the individuals for purposes of employment or volunteer services. I understand and agree that information may be obtained from sources that I provided above and that this information will be held confidentially by **Catholic Charities**. I have also read and understood the above stated information within this release and am signing below of my own free will.

\_\_\_\_\_ I hereby acknowledge that I have been notified in a separate writing that **Catholic Charities** may request a Consumer Report about me. I understand that the Consumer Report may contain information bearing on my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living. I understand that the Consumer Report may contain public record information such as consumer credit reports, criminal records, judgments, liens, driving records, educational history, prior employment history, or other public record information. I further understand that information may be requested from various Federal, State, local and other agencies that reflects my past activities.

\_\_\_\_\_ By my signature below, I authorize **Catholic Charities** to request and obtain a Consumer Report containing, without limitation, the above-described information in connection with my application. I also authorize, without reservation, any person, agency, or other entity contacted by or on behalf of **Catholic Charities** to furnish the above described or similar information. Also by my signature below, I waive any and all causes of action that I may have against **Catholic Charities** caused by the gathering or supplying of the above described or similar information.

\_\_\_\_\_ I understand that a criminal background check will be conducted prior to and may be conducted during my service. I authorize investigations of all statements contained in the application.

\_\_\_\_\_ My signature indicates that I have read and understand the above. **Do not sign until you have read and initialed the above statements.**

**Applicant Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_