

**YMCA OF THE CAPITAL AREA  
PRE-EMPLOYMENT AND/OR VOLUNTEER DISCLOSURE  
AUTHORIZATION TO RELEASE INFORMATION**

I understand that in connection with my application for employment, and/or continuous employment, and/or volunteer opportunities, YMCA of the Capital Area, **IntelliCorp Records, Inc.**, their agents, assigns or any other authorized third parties (collectively, the "Investigators") may be performing, requesting, obtaining or conducting a background check on me. This background check may include an inquiry into my employment history, education, general character or reputation, work experience, driving, criminal and credit histories and such other information the ("Information") as may be required.

I understand that Employer may rely on any part or all of this Information in determining whether to extend an offer of employment and/or volunteer opportunities to me. I further understand that if any adverse action is taken by Employer, or if Employer chooses not to extend an offer of employment and/or volunteer opportunities to me based upon the information, that I will be provided a copy of such Information along with a summary of my rights under the Fair Credit Reporting Act.

I understand that the background check which may be performed by investigators is being performed as part of the pre-employment and/or volunteer opportunities process to evaluate me for employment/volunteer opportunities and is not conducted for any other purpose other than in connection with my application for employment and/or volunteer opportunities.

I have read this Pre-Employment and/or Volunteer Disclosure and by signing below, hereby authorize Investigators to conduct a background check as described herein in conjunction with my application for employment and/or volunteer opportunities. I hereby release Investigators from any and all liability related to the procurement or disclosure of any information provided by me or obtained about me in connection with my application for employment and/or volunteer opportunities with Employer. I further direct and authorize Investigators to conduct the background check and further authorize any third parties who may be the custodians of or in possession of the requested Information, to disclose such Information to Investigators in connection with this background check.

I understand and agree that any omission, false statement, misleading statement, or answer made by me on my application or any supplements to it and in any interviews will be sufficient grounds for rejection of employment and/or volunteer opportunities and my discharge after employment and/or volunteer opportunities.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name (First, Middle, Last)

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

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

\_\_\_\_\_  
Gender (Male / Female)

\_\_\_\_\_  
Maiden Name (if applicable)

\_\_\_\_\_  
Driver's License #

\_\_\_\_\_  
Exp. Date

\_\_\_\_\_  
Driver's License Issuing State

\_\_\_\_\_  
Current Address, City, State, Zip Code

\_\_\_\_\_  
Dates Lived Here

Addresses for the Past Seven (7) Years: Please Print Dates of Residence  
(\*Include street name and street number, city, state, zip code)

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Branch Name: \_\_\_\_\_

Dept.: \_\_\_\_\_

Date: \_\_\_\_\_