Hoboken-North Hudson YMCA
Volunteer/Employee Background Check Authorization

In submitting a volunteer/job application and to continue my position/employment at the Hoboken-North Hudson YMCA I,

_____

(print name)

understand that the Hoboken-North Hudson YMCA will perform a National Criminal Background check on me. If a conviction appears in the findings of the criminal background check, my position/employment with the YMCA will be reviewed and termination may result.

I understand that a driver history summary may be requested if my position/job at the YMCA warrants it and will be completed annually. The YMCA may run periodic criminal checks on all staff, if required by law or by insurance carriers.

I understand that if I refuse this National Employment check, the Hoboken-North Hudson YMCA will terminate my position/job immediately.

Employees Name (Print): _____
First Middle Last

Maiden name/Alias: _____

Employee's signature _____

Date: _____

Date of birth: ____ ____/____ ____/____ ____ ____ ____
MONTH DAY YEAR

Social Security Number: ____ ____ ____ - ____ ____ - ____ ____ ____ ____

Home Phone number: _____
Address: _____
_____

Witness name (print) _____

Witness signature: _____