

Please check appropriate box and complete location information for response to be returned

Employee
 Volunteer
 Manager/Work Site: ____

Disclosure: Northeast Michigan Community Service Agency, Inc. (NEMCSA) hereby discloses that it may obtain a criminal history report(s) for the purpose of considering my application for employment, other employment purposes or to volunteer for any NEMCSA program(s). Reports may also be obtained during my employment or volunteer service with NEMCSA, if required by a program, contract, or a need is identified.

If a record is found, you will receive written notification and have the right to dispute the record by: Obtaining finger prints on a state applicant fingerprint card. The finger print card should be mailed to the Criminal Justice Information Center with a copy of the criminal record response and a letter requesting the Criminal Justice Information Center verify the criminal record does not belong to you.

<u>Authorization</u>: (*Please Print Full Name*) I _______, hereby authorize Northeast Michigan Community Service Agency, Inc. (NEMCSA) to conduct criminal history report(s). I have read the above Disclosure and am providing accurate, true and correct information on a voluntary basis. I acknowledge that I am signing this form as a normal part of the NEMCSA employment/volunteer process.

| Signature | | Date | |
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| Name | | | |
| (Last) | | (First) | (Middle Name) |
| Address | | | |
| (Street) | | (City) | |
| | | Phone () | |
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