



GIRL SCOUT COUNCIL OF ORANGE COUNTY
Consent for Background Screening

Service Unit #
Revised 04/17/08

The safety of the girls is the most important consideration in the appointment of a volunteer. In order to help safeguard the girls in our care, the Girl Scout Council of Orange County has joined other youth serving agencies in conducting background screening on adults working with girls. We request only information that is allowed by California law. Information obtained is confidential as provided by law and will be used and retained only as authorized by law.

AUTHORIZATION/WAIVER/INDEMNITY

I hereby give my permission for the Girl Scout Council of Orange County to obtain information relating to my background screening. I also understand that the records could contain information presumed to be expunged. I understand that as long as I remain a volunteer of the Girl Scout Council of Orange County, the background screening may be repeated at any time. If I dispute the record as received by the Girl Scout Council of Orange County, I understand that I will have an opportunity to review the record received by contacting Castle Branch, Inc. directly, and that a procedure is available for clarification with Castle Branch, Inc.

I, the undersigned, do, for myself, my heirs, executors, and administrators, hereby remise, release, and forever discharge and agree to indemnify and hold harmless the Girl Scout Council of Orange County, and each of their respective officers, directors, employees and agents, from and against any and all causes of actions, suits, liabilities, costs, debts and sums of money claims and demands whatsoever, (INCLUDING BUT NOT LIMITED TO CLAIMS FOR NEGLIGENCE AND/OR STRICT LIABILITY OF THE GIRL SCOUT COUNCIL OF ORANGE COUNTY) and any and all related attorneys' fees, court costs, and other expenses, resulting from the investigation of my background screening in connection with my application to become a volunteer with the Girl Scout Council of Orange County.

CALIFORNIA NOTIFICATION AND RELEASE

In connection with my application for volunteer services with you, I understand that criminal reports which may contain public record information may be requested from Castle Branch, Inc. P. O. Box 1699, Wilmington, NC 28402, 888-723-4263 [CRA]. These reports may include the following types of information: county/counties of residence criminal records, social security records, residency records, sex offense records, driving records, criminal records or other information from federal and/or state agencies. I AUTHORIZE, WITHOUT RESERVATION, ANY PARTY OR AGENCY CONTACTED BY CASTLE BRANCH, INC. TO FURNISH THE ABOVE-MENTIONED INFORMATION. I have the right to make a request to Castle Branch, Inc. [CRA], upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including the sources of information, and the recipients of any reports on me which CRA has previously furnished within the two-year period preceding my request. I hereby authorize procurement of criminal report(s). If appointed this authorization shall remain on file and shall serve as ongoing authorization for you to procure criminal reports at any time during my volunteer appointment.

NOTICE TO CALIFORNIA APPLICANTS

Under California law, the criminal reports provided on you are defined as investigative criminal reports. These reports may contain information on your character, general reputation, personal characteristics and mode of living. Under section 1786.22 of the California Civil Code, you may view the file maintained on you by Castle Branch, Inc. during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services, by appearing at Castle Branch, Inc. in person or by mail. You may also receive a summary of the file by telephone. The agency is required to have personnel available to explain your file to you and the agency must explain any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification. I request to receive a copy of any investigative criminal report ordered on me by checking this box. Please send the copy this way: U.S. Mail. Email address:

Birth Date: / / Sex: Female Male
PLEASE PRINT NAME (LAST, FIRST, MI) IN CAPITAL LETTERS month/ date/ year

Current Address City State Zip

Applicant's Signature Day Phone Eve Phone Date

Position Applying For Troop Number (if applicable)

IDENTIFIERS - PLEASE PRINT.

Social Security# - - Driver's License # State Former Last Names

Provide residences from the past 7 years-City County State From/To

Provide residences from the past 7 years-City County State From/To

PLEASE SUBMIT ORIGINAL FORM ONLY TO:

GSCOC - Volunteer Resources
9500 Toledo Way, Suite 200
Irvine, CA 92618-1806

Please contact the Volunteer Resource Department if you have any questions, 949-461-8800 or VolunteerResources@gscoc.org