



**Saline Area Senior Center  
Criminal Background Screening  
Consent Form**

7190 N. Maple Road | Saline, MI 48176  
734.429.9274

As a present or prospective contractor or volunteer of the Saline Area Senior Center (SASC), I understand it is the Center's policy to secure criminal and / or driving history information as part of their screening process using the information provided.

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: Male \_\_\_\_\_ Female \_\_\_\_\_

Ethnicity: \_\_\_\_\_

I hereby authorize the Saline Area Senior Center (SASC) to conduct, by an individual, a conviction only criminal background history search and sex offender registry search. I hereby consent to this search being conducted and to the disclosure of the result of that search by the individual to SASC. I further hereby release the individual conducting the search, and SASC, from any and all liability, claims and damages, including but not limited to, claims for releasing or using any information revealed as a part of this search for purposes of evaluating my placement as a volunteer or contractor with SASC. I also understand and acknowledge that false information provided by me on criminal convictions will result in disqualification from volunteer work or as a contractor with the SASC.

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

\*Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
\*if under 18 years of age

**Office Use Only:**

Approved ( ) Denied ( )

Date Background Check Submitted: \_\_\_\_\_ Date Approved/Denied: \_\_\_\_\_