Criminal Background Check Request Form

Section 1–To be completed by the Host Departme

Volunteer Name	Volunteer Position Title
Volunteer Email Address	

Billing Org Name
Billing Org #
Billing Fund #

Signature

Section 2 –To be completed by the Volunte

I understand that Wichitat® te University volunteer assignments may requide ackground check. I acknowledge and understand that any misrepresentation also presentation or omission of facts here in a be considered cause for dismissal from any volunteer assignment an advised and understand that the volunteer assignment of upon a satisfactory criminal background check. In the event a crimbia akground checks ideemed to require consideration of an adverse cision regarding my volunteer assignment with Wichita Stateversity, I will be provided with a copy of the eport and a description in writing of my rights under the federair Credit Reporting Act.

To be considered for a volunteer assignment with WichtadeSUniversity, I understand that I wilbe provided a link, via email to the websitewhere I will v j š j š a background check through Validity ^ CE vajthiPd-^}o $\mu š j v \bullet$, party vendor that completes background checks (}CE t^h.

Signature