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HUMAN RESOURCES DEPARTMENT 2117 W. River Rd. | Mpls., MN 55411

Background Check – Informed Consent

Background Check – Informed Consent – *Contractor*

Please type or print in ink - All fi	elds must be com	pleted	Check one:	New Contractor	□Current Contracto
TO BE COMPLETED BY THE F The following named individua	l has made applica	ation with the Minne	apolis Park & Recrea	ation Board for the o	contractor position of:
Hiring Manager (individuals rec					
Type of Check Requested:	_				
TO BE COMPLETED BY THE A	APPLICANT/CON	TRACTOR:			
Applicant's Name (First, Middle	e, Last):				
List any Maiden, Alias, or Form	er Name(s):				
	Birth	n Date:	Phone:		
Current Address:					
City:			State:	Ziŗ):
Temporary Address (if applicab	le):				
City:			State:	Ziŗ):
Driver's License # (or State ID#	[‡]):				
State:	Class	S:	_Expires:		
Have you ever resided or worke	ed outside of the s	tate of Minnesota?	□Yes □]No	
If yes, list the state(s) in which	you have resided o	or worked including d	ates:		
Have you ever been convicted charges pending (excluding mi			ite, or municipal co □Yes □		fense, or are there any
Failure to disclose or giving fa	lse information m	nay result in rejectio	n of application or	dismissal from emp	oloyment.
If yes, please provide informat taken, (attach additional sheet		nse: 1) charge convic	ted of, 2) date of c	onviction, 3) court	and location, 4) action

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I, ______understand that the Minneapolis Park & Recreation Board (MPRB), is seeking background check data pursuant to Minn. Stat. § 299C.62 et seq., the Minnesota Child Protection Background Check Act ("Act") and Minn. Stat. §13.05 subd. 4 as part of my application for employment or volunteering, or ongoing service with the MPRB. I acknowledge that the MPRB has informed me of my rights under these laws, including:

- 1) The right to be informed that the MPRB will request a background check on me as a children's service worker;
 - a) For purposes of employment or continuation of employment;
 - b) To determine whether I have been convicted of any crime specified in Minn. Stat. § 299C.61, subdivision 2 or 4;
- 2) The right to be informed by the MPRB of its response to the background check and to obtain from the MPRB, if I request in writing, a copy of the background check report, to be picked up in person with photo identification;
- 3) The right to obtain from the MPRB any record that forms a basis for the report;
- 4) The right to challenge the accuracy and completeness of any information contained in the report or record under the relevant provisions of the Data Practices Act;
- 5) The right to be informed by the MPRB if my application to be employed with or opportunity to continue as an employee has been denied because of the background check report.

I authorize the MPRB or its authorized assignee(s) to conduct a criminal background check. This information will be used to determine my suitability for employment with the MPRB. I understand that continued employment is contingent on receiving satisfactory results from this background check.

I further understand that the MPRB will use my Minnesota State Driver's License / Minnesota State Identification Card information given below to conduct an investigation of my background, which will include my driver's license status, driving history, and criminal conviction history (if any) as directly related to the position for which I am applying with the MPRB.

I certify that all the information I have provided on this form is true and complete to the best of my knowledge. I understand that giving false information or omitting requested information could result in rejection of my application or dismissal if my application is accepted. I understand that submitting this information does not guarantee my acceptance into a MPRB position.

The expiration of this authorization will be no longer than a period of one year from date of my signature.

Applicant's Signature:	Date
If applicant is under the age of 18 years,	
Parent/Guardian's Signature:	Date

BACKGROUND INVESTIGATIONS POLICY (Applies to applicants, current employees, volunteers, and contractors)

The Minneapolis Park & Recreation Board (MPRB) will request all applicants who receive an offer of employment, be subject to a background investigation which may include criminal history, driver's license records, and/or credit history check as necessitated by position requirements. Criminal history checks will be conducted in accordance with the Minnesota Child Protection Background Check Act, Minn. Stat. §299C.60 et. seq. (2008) and other background checks as allowed by law. The results of an individual's background investigation will be reviewed on a case-by-case basis to determine eligibility for the position applied to. Any offer of employment will be conditional upon a determination by the MPRB that an applicant's background investigation results do not preclude the individual from employment with the MPRB.

In addition, if the MPRB knows or has reason to believe that a current employee or volunteer has a criminal conviction that pertains to their current position, that individual will also be requested to consent to a background investigation as described above. The MPRB will also require a background check on all individuals prior to transfer or promotion. The MPRB specifically reserves any and all rights it may have to request consent to conduct criminal background checks at any time regarding current volunteers, applicants, or employees.

Adherence to this policy by the MPRB, its employees, and job applicants or others shall in no way limit the MPRB's right to require additional information or to use procedures currently in place or other procedures to gain information concerning criminal activities of employees and applicants.

- Legal Reference: Minn. Stat. §299C.60 et. seq. Policy Issued: 6/3/2009

My signature below confirms that I have read the MPRB's Pre-Employment Criminal Background Check policy and certify that all the information I have provided on this form is true and complete to the best of my knowledge. I understand that giving false information or omitting requested information could result in rejection of my application or dismissal if I am hired.

Name (Please Print):			
Signature:		Date:	
Distribution: Original: Human Resources	Report completed by:		
•	Date:		