

FOR VOLUNTEER USE ONLY
LUTHERAN SOCIAL SERVICES OF SOUTH DAKOTA
BACKGROUND CHECK WAIVER

New Hire
5-Year
Promotion

I have made an application to, or currently volunteer at Lutheran Social Services of South Dakota. I authorize Lutheran Social Services of SD to obtain and review my criminal background, employment records, wage records, and any other background information deemed necessary. I affirm that this document contains no misrepresentations or falsifications, omissions, or concealment of material fact and the information given by me is true and complete to the best of my knowledge and belief. I am aware that statements made by me on this form are subject to later investigation. I am further aware that if any investigation discloses such misrepresentation, falsification, omission or concealment of materials fact, it may disqualify me from my position with Lutheran Social Services of South Dakota.

Signature _____

Date

Please check
applicable program:

☐ Canyon Hills Center

☐ New Beginnings Center

☐ Shelter Care (Rapid City)

☐ Summit Oaks I

☐ Summit Oaks II

☐ Other

Full Name:

Soc Sec#:

All Previous/Other
Names Used:

Phone:

Do you have a valid
drivers license?

☐ Yes

☐ No

Gender:

☐ Female

☐ Male

List all states in which
you have resided:

If yes for any answer below, please explain in details on the reverse of this form.

Have you ever been arrested, convicted of a crime, imprisoned, placed on probation, received a suspended sentence or forfeited bail for any offense in criminal or military court?

☐ Yes

☐ No

Have you ever engaged in any sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution?

☐ Yes

☐ No

Have you ever been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?

☐ Yes

☐ No

Have you even been civilly or administratively adjudicated to have engaged in the activities described in the previous questions?

☐ Yes

☐ No

Do you understand that you have a continuing duty to disclose any adverse contact with law enforcement or sexual misconduct throughout the terms of your volunteer services?

☐ Yes, I understand

☐ No, I don't understand

Office Use Only

Background Check
Completed

☐ Yes

☐ No

Signature

Date

Approved

☐ Yes

☐ No

Director Signature

Date

Approved

☐ Yes

☐ No

HR Signature

Date