FAYETTEVILLE STATE UNIVERSITY

CRIMINAL BACKGROUND CHECKS
VOLUNTEERS AND CONTRACTORS

Authority: Issued by the Chancellor. Changes or exceptions to administrative policies issued by the Chancellor may only be made by the Chancellor.

Category: University-Wide

Applies to: ● Administrators ● Faculty ● Staff ● Volunteers ● Contractors

History: Approved – April 30, 2012
First issued – May 4, 2012

Related Policies: ● Volunteers

Contact for Info: Office of Legal Affairs (910) 672-1145

I. PURPOSE

Fayetteville State University (University) is committed to providing a safe and secure environment for all University constituents, including employees, students, visitors and the general public. To protect the campus community and its assets, the University seeks, to the extent possible, to confirm an individual’s suitability relative to the requirements of their volunteer service or contractual obligations to the University. This policy (Policy) is designed to enable the University to reduce its risks and to achieve the goal of providing a safe and secure environment by conducting criminal background checks on certain volunteers and independent contractors.

II. VOLUNTEERS

The University shall require a volunteer to be subject to a criminal background check if the volunteer’s service to the University will involve working with minors or having direct contact with minors and/or the volunteer will have fiduciary responsibilities, such as access to University funds. The background check shall be conducted in accordance with the procedures outlined in Section IV of this Policy and must be completed prior to the volunteer beginning the volunteer’s service with the University.

III. INDEPENDENT CONTRACTORS

The University shall require an independent contractor and/or its employees to be subject to a criminal background check in situations where work to be performed by the independent contractor involves security-sensitive functions or where the independent contractor will have direct contact with minors. A background check shall be conducted in accordance with the procedures outlined in Section IV of this Policy and must be completed prior to the execution of a contract between the independent contractor and the University.
VI. PROCESS FOR CONDUCTING BACKGROUND CHECKS

The process for obtaining a criminal background check shall be as follows:

A. Background Check for a Volunteer

If a proposed volunteer has satisfied all of the requirements of the University’s policy on volunteers and the volunteer will engage in service to the University as described in Section II above, the Unit Head interested in the services of the volunteer shall inform the volunteer that a background check will be required. The Unit Head shall provide to the volunteer the Authorization to Conduct a Criminal Background Check (Attachment A) and the Background Disclosure Form. (Attachment B) which must be completed, signed and submitted to the Office of Legal Affairs for processing. The criminal background check must be completed prior to the volunteer’s service with the University. If a proposed volunteer chooses not to sign the Authorization to Conduct a Criminal Background Check form (Attachment A) and the Background Disclosure Form. (Attachment B), the University will not consider the individual as a volunteer.

B. Background Check for an Independent Contractor

A Unit Head interested in the University contracting with an independent contractor who will be engaged in activities described in Section III above shall inform the independent contractor that a background check will be required of the independent contractor and/or the independent contractor’s employees. The Unit Head shall provide to the independent contractor the Authorization to Conduct Criminal Background Check form (Attachment A) and the Background Disclosure Form. (Attachment B), which must be completed, signed and submitted to the Office of Legal Affairs for processing. The background check must be completed prior to the execution of a contract between the independent contractor and the University.

C. Processing of Background Check Forms

Upon completion of the Authorization to Conduct a Criminal Background Check form and the Background Disclosure Form, the proposed volunteer or independent contractor shall forward the forms to the Office of Legal Affairs. The Office of Legal Affairs shall submit the request for a criminal background check to a third-party provider who will conduct the background check(s). In order to maintain the utmost discretion and confidentiality, results will only be provided to the Office of Legal Affairs.

D. Legal Affairs Review

Upon receipt of the report from the third-party vendor, the Office of Legal Affairs shall review the results of the criminal background check. If the proposed volunteer’s or independent contractor’s criminal background report reveals information that the Office of Legal Affairs deems relevant to the proposed volunteer’s or independent contractor’s appropriateness to engage in the service/activities described above, the Office of Legal Affairs shall discuss the results of the reports with the appropriate Unit Head. After consulting with the Office of Legal Affairs, The Unit Head shall determine the suitability of the proposed volunteer or independent contractor for service to the University.
FAYETTEVILLE STATE UNIVERSITY
VOLUNTEERS/CONTRACTORS

Authorization to Conduct a Criminal Background Check

Volunteer/Contractor Responsibility _______________________________________________________
Department/Unit_______________________________________________________________________

I understand that by this document Fayetteville State University (University) is disclosing that a criminal background check may be obtained as part of my request to become a University volunteer. A consumer or credit reporting agency that has a contractual relationship with the University will provide this report.

By signing this document, I authorize the University to procure a criminal background report from a consumer or credit reporting agency and I hereby release the University, members of its board, officers, employees, agents, and representatives from all liability or responsibility arising out the information provided in the consumer report and also out of the manner in which the report was prepared and provided and considered by the University and/or the consumer reporting agency. I further authorize any party or agency contacted by the University or its agent to furnish criminal background information and hereby release all such parties involved from any liability and responsibility for damages for having furnished such information in good faith.

I understand that the information requested on the disclosure form is for the sole purpose of gathering the above-mentioned information about me accurately. I understand that providing my social security number on this form is voluntary and is for the sole purpose of obtaining a criminal background report. A facsimile or photographic copy of this authorization will be as valid as the original.

I understand that if I fail or refuse to execute this document no further consideration will not be given to my request to become a volunteer.

Volunteer Signature ____________________________ Date ______________
Volunteer Name (printed) ____________________________________________

UPON COMPLETION, PLEASE FAX TO THE ATTENTION OF THE OFFICE OF LEGAL AFFAIRS AT 910-672-2291
**FAYETTEVILLE STATE UNIVERSITY**

**Background Check Disclosure Form**

**VOLUNTEER/CONTRACTOR INFORMATION**

Volunteer/Contractor Responsibility ____________________________________________________

Department/Unit _____________________________________________________________________

**GENERAL INFORMATION**

Last Name ___________________________ First Name ________________________________

Middle ____________________________ Maiden Name ______________________________

Alias ___________________________________________________________________________

Social Security Number _______________ Date of Birth ________________________________

Driver’s License Number _____________ State ____________ Issue Date _________________

Gender ( ) Male ( ) Female             Race ________________________________

**CITIES/STATES RESIDED IN WITHIN THE LAST SEVEN YEARS**

Current Address: ________________________________________________________________

________________________________________________________________________________

Length at Current address ___________ (If less than 7 years please provide previous addresses below)

Previous Address (1) ____________________________________________________________

______________________________________________________________________________

Previous Address (2) ____________________________________________________________

______________________________________________________________________________

Length at previous address (1) ___________ Length at previous address (2) ____________

**PLEASE FAX ALONG WITH THE AUTHORIZATION FORM TO**

**THE OFFICE OF LEGAL AFFAIRS AT 910.672.2291**