



CONSENT AND AUTHORIZATION FORM
 POB 2285, Blairsville GA 30514
 Tel: 706-745-2121 Fax: 888.607.7144 Email: janice@bsassllc.com

Client: Georgia District of Kiwanis & Kiwanis Club #: K (enter # here)

The Georgia District of Kiwanis International is a division of a non-profit organization dedicated to improving lives and communities worldwide. It is imperative that we insure our members are of the highest Good and Moral Character. To that end, Georgia District of Kiwanis has contracted with Background Screening and Security Solutions, LLC. (BSASS LLC) to be the sole source to conduct background records checks of its members. The screening report information will be secured and kept in the highest confidence and not released outside of BSASSLLC except as authorized by you in writing or as indicated in the certifications block below.

Search Code W – Works with Children

I, the undersigned applicant, (i) affirm that I authorize the Georgia District of Kiwanis & Kiwanis Club Number as listed above, (hereinafter identified as and referred to as Client), to obtain a criminal records background check on the undersigned, and (ii) authorize BSASS LLC, or any of its agents, to receive and provide, orally or in writing, the results of such checks, to BSASS LLC, the Client, or designated representative, and (iii) release and hold harmless the Client, BSASS LLC, and their agents, representatives, and entities and all individuals involved in the reporting process regarding the undersigned, from any and all claims, or liability to, the undersigned that may result from, arise out of, or in connection with the check. This authorization continues for the duration of my membership with the Client organization.

APPLICANT INFORMATION – PLEASE PRINT CLEARLY:

Please check the appropriate category:

I am current Georgia Kiwanis Member	I am a new applicant to Georgia Kiwanis
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GIVEN First Name: Middle: Last: _____

Soc Sec #: DOB: Sex: Race: _____

Current Street Address: City, State, Zip: _____

Email: (to receive certificate and/or report details): _____

Applicant Signature: Today's Date: _____

CERTIFICATIONS:

Client affirms that (i) the background check is being ordered from BSASS LLC for use by client for the sole and express purpose of evaluating suitability of a volunteer for membership, or any other lawful purpose for which criminal background check would apply, and (ii) information from the background reports will not be used in violation of any Federal, State, or Local equal opportunity laws or regulations **including those regarding privacy**, and (iii) Client has provided to the subject of the background check, a clear and conspicuous written disclosure, in a document that consists solely of the disclosure, that a background report may be obtained on the subject, and the subject has provided written authorization of the client's procurement of the report, and (iv) BSASS LLC will provide a "YES" for a clear record, and a "NO" for a record that does not meet Criminal Criteria Clearance as established from time to time by the Georgia District of Kiwanis.

Client further affirms that on their behalf, (i) upon an applicant receiving a "NO," and before taking adverse action against the subject of the background check, based in whole or in part of the same, BSASS LLC will provide applicant with a copy of the background report, a copy of the FCRA's Summary of Consumer Rights, and a pre-adverse action letter which will set forth the appeal process, and authorize BSASS to release any and all related documents to the Screening Board for review, and (ii) upon the Client's decision to uphold a "NO" decision, Client will provide applicant with an adverse action letter in support of the same.

----- **FOR KIWANIS USE ONLY** -----

Printed Name of Club Screening Representative: Contact Telephone: _____

Club Representative Signature: Today's Date: _____