

# WESTSIDE UNITARIAN UNIVERSALIST CHURCH POLICIES AND PROCEDURES

## CRIMINAL BACKGROUND CHECK POLICY

### SECTION 4

The purpose of this policy is to designate formal and routine procedures for making legal investigations of possible criminal history of persons who may be involved either with the children or with the finances of the church.

#### I. Persons to be checked

- A. Minister
- B. Director of Religious Education
- C. Any adult, staff or volunteer who serves as a church school teacher, youth sponsor, nursery worker or anyone who serves in an on-going volunteer position within the child or youth programs of the church.
- D. Church Treasurer
- E. Board President
- F. Board Vice-President
- G. Financial Secretary
- H. Other persons now or in the future who will have or possibly may have contact with children or with money that the Board of Directors decide is necessary and consistent with the purposes of this policy.

#### II. Persons responsible for checking

- A. The Board of Directors shall assign three persons qualified for reviewing criminal background transcripts and approving or denying placement.
- B. The terms of these positions shall be indefinite.
- C. The Board shall have the power to replace any reviewer. Reviewers desiring to resign their position should give as much notice as possible to the Board.
- D. Qualifications:
  - 1. Persons selected shall have been a member in good standing of Westside UU Church for a minimum of 3 years.
  - 2. Persons selected shall have read and understand the "PENALTY OF THE UNAUTHORIZED OBTAINING, USE OR DISCLOSURE OF CRIMINAL HISTORY INFORMATION" at the back of this policy section.
  - 3. Persons selected shall perform required training at the Volunteer Center of Tarrant County prior to submitting or evaluating any criminal history transcripts.

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III. Procedure for review

A. Preparation of Application/Consent Form

1. The consent/indemnity form (see form at end of policy section) must be completed as indicated and signed by the applicant. NOTE: Separate forms are provided for persons under 18 years of age.
2. These forms must be retained for a minimum of 3 years.

B. Preparation of Background History Check Form.

1. The form (see form at end of policy section).must be completed as listed and signed by the applicant.
2. This form must be kept in a locked storage drawer until the background check is completed as which time it shall be destroyed by shredding.
3. At this time the applicant shall be made aware of the grievance process available should a dispute arise over a criminal background check report or the decision of placement based on said report.
4. This form, when completed, shall be submitted to checking agency. Separate checks must be submitted for any aliases provided by applicant.

C. Receipt of Background Check Information

1. All records pertaining to a criminal background check shall be destroyed with a shredder within 5 days of making a decision of each applicant's suitability for placement.
2. All records pertaining to a criminal background check shall be destroyed within 30 days after having received the records from the checking agency.
3. All criminal background reports shall be kept in a locked storage drawer until such time as the records are destroyed by shredder.
4. Information contained in the returned report may only be shared with the applicant, another qualified reviewer and the checking agency. Under no circumstances shall it be shared with anyone else.
5. Applicant may NOT be allowed to keep or photocopy his or her history transcript.
6. The reviewer may not record in any way, under any circumstances, the information contained in the history transcript except for cases resulting in grievances.

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D. Review of Reports with criminal history

1. Positions working with children and youth:
  - a. A reported conviction, plea bargain or deferred adjudication of rape, sexual abuse or physical abuse of any nature automatically disqualifies any applicant.
  - b. All other recorded offenses shall be reviewed on a case by case basis. A second opinion should be obtained in these cases prior to making a decision.
2. Positions working with church finances:
  - a. A reported conviction, plea bargain or deferred adjudication of theft, robbery, burglary, or fraud, of any nature, automatically disqualifies any applicant.
  - b. All other recorded offenses shall be reviewed on a case by case basis. A second opinion should be obtained in these cases prior to making a decision.
3. Consultation among qualified reviewers related to any background check may be held whenever desired.

E. Failure of Applicant to be accepted

1. The reviewer should meet with the applicant privately to discuss the nature and reasons for denial. This will give the applicant an opportunity to withdraw from consideration. The reviewer(s) should notify the Director of Religious Education or Board of Directors of the self-removal by applicant. The details of the self-removal shall not be disclosed to anyone except another qualified reviewer or the checking agency.

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F. Grievances

1. Disagreement with the accuracy of information.
  - a) See the forms at the end of the policy for process related to accuracy of information.
2. Disagreement based on qualifications or suitability.
  - a) Reviewer should obtain a second opinion from another qualified reviewer or the checking agency.
  - b) In the case of continued dispute, the reviewer should present facts and his or her recommendation to the Board of Directors for final decision.

# Penalty for the Unauthorized Obtaining, Use, or Disclosure of Criminal History Information

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Effective September 1, 1993, the use of Texas criminal history record information is governed by Sections 411.081 through 411.127, Government Code. All individuals who access criminal history record information should be aware of the authorized uses and penalties for misuse. This notice is provided in accordance with Section 411.085 and its requirement that the Department of Public Safety notify all who apply for access to Criminal History Record Information of these penalties. Refer to Sections 411.081 through 411.127 for more information.

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## *Section 411.085 of the Texas Government Code:*

- (a) A person commits an offense if the person knowingly or intentionally:
- (1) obtains criminal history record information in an unauthorized manner, uses the information for an unauthorized purpose, or discloses the information to a person who is not entitled to the information;
  - (2) provides a person with a copy of the person's criminal history record information obtained from the department; or
  - (3) violates a rule of the department adopted under this subchapter.
- (b) An offense under Subsection (a) is a Class B misdemeanor, except as provided by Subsection (c).
- (c) An offense under Subsection (a) is a felony of the second degree if the person:
- (1) obtains, uses, or discloses criminal history record information for remuneration or for the promise of remuneration; or
  - (2) employs another person to obtain, use, or disclose criminal history record information for remuneration or for the promise of remuneration.
- (d) The department shall provide each person who applies for access to criminal history record information maintained by the department with a copy of this section.

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Texas Department of Public Safety



**DO NOT  
PHOTOCOPY!**

**VERIFY**

**DO NOT  
PHOTOCOPY!**

**Background Verification Release Form**

**AGENCY INFORMATION**

Date	Agency Name Westside Unitarian Universalist Church
Contact Name	
Agency's Main Phone Number 817-924-6988	Agency's Fax Number

**APPLICANT INFORMATION:**

Applicant Full Name (Last, First, MI)		Maiden or Other Name(s) Used	
Current Address			
City	State	Zip Code	County
Social Security Number	Date of Birth	Driver's License Number	State Issued
Position Applied For			
<b>Gender</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Race</b> <input type="checkbox"/> African American <input type="checkbox"/> American Indian <input type="checkbox"/> Anglo <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> Other		

I hereby authorize VERIFYI and or its Service Provider to request and receive any and all background information about or concerning me, including but not limited to my Criminal History, Social Security Number Trace including a consumer report under the Fair Credit Reporting Act, 15 U.S.C 1681, Driving Record, Employment History, Military Background, Civil Listings, Educational Background, Professional License from any Individual, Corporation, Partnership, Law Enforcement Agency, and other entities including my Present and Past Employers.

The criminal history, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudications and delinquent conduct as committed as a juvenile. I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer position with this organization. I also understand that as long as I remain an employee or volunteer here, the criminal history check may be repeated at any time. I understand that I will have an opportunity to review the criminal history as received by client/agency and a procedure is available for clarification, if I dispute the record as received. I also understand that the criminal history could contain information presumed to be expunged.

I further release and discharge VERIFYI and their Service Provider and all of their Subsidiaries, Affiliates, Officers, Employees, Contract Personnel, or Associates, from any and all claims and liability arising out of any request for information or records pursuant to this authorization, procurement of an investigative consumer report and understand that it may contain information about my character, general reputation, personal characteristics, and mode of living, whichever are applicable.

I understand that I have the right to make written request within a reasonable period of time to VeriFYI for additional information concerning the nature and scope of the investigation. I acknowledge that I have voluntarily provided the above information for employment/volunteer purposes, and I have carefully read and understand this authorization.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Printed Name

\_\_\_\_\_  
Parent/Guardian's Signature  
(if under 18 years of age)

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## GRIEVANCE PROCESS

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1. If an applicant feels that the criminal history record transcript received by the agency is not theirs, the applicant should have their fingerprints taken and send the prints to DPS with the form at left.

Mail all information to:

TEXAS DEPARTMENT OF PUBLIC SAFETY  
CRIME RECORDS SERVICE  
P.O. Box 4143  
Austin, Texas 78765-4143

2. If the applicant feels there is a mistake in the criminal record, fingerprints and the form at left should be sent with a letter specifying the area of concern. An investigation will be conducted to determine whether or not an error has been made.

This letter should be addressed to: TEXAS DEPARTMENT OF PUBLIC SAFETY  
Error Resolution Department  
P.O. Box 15999  
Austin, Texas 78761-5999

**EXEMPTION FORM**

To: Texas Department of Public Safety Crime Records Service

From: \_\_\_\_\_  
(AGENCY THAT SUBMITTED ORIGINAL REQUEST)

Subject: Criminal History Record Resolution Request

The individual described below has been denied employment/licensing/certification at our agency due to a possible criminal history returned to us in response to our original name, sex, race, date of birth search submission to D.P.S. This form is a request for a no-charge fingerprint search of the D.P.S. files to positively determine identification by fingerprints, if a record exists. Individuals must obtain a fingerprint card and fingerprinting services from the local law enforcement agencies (Police Dept.; Sheriff's Office) or at the Texas Department of Public Safety Headquarters in Austin, Texas.

**PLEASE TYPE OR PRINT LEGIBLY - FAILURE TO COMPLETE ALL INFORMATION WILL CAUSE REJECTION AND RETURN OF REQUEST**

Name (last, first, middle) \_\_\_\_\_ Other Names/Alias (married, maiden) \_\_\_\_\_

SEX	RACE	DATE OF BIRTH (MO/DAY/YEAR)
_____ Male _____ Female	_____ Black _____ White _____ Other	

SIGNATURE OF APPLICANT \_\_\_\_\_

AGENCY MAKING ORIGINAL REQUEST X-	SIGNATURE OF AGENCY REPRESENTATIVE AND DATE X-
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DPS/SID # on criminal history record returned to agency, if available  
X-

Results of this inquiry are to be returned to:	
X-	
Name or Agency Name	_____
Street of P.O. Box	_____
City, State, Zip	_____
Telephone Number	_____

Mail this form plus completed fingerprint card to:

**Texas Department of Public Safety  
Crime Records Service  
Error Resolution Unit  
P.O. Box 4143  
Austin, Texas 78765-4143**

If you have any questions regarding this procedure or completion of required forms, telephone DPS Crime Records Service (512) 424-7256, Monday - Friday 8am to 5pm.

**The agency representative must sign at the x's before giving to employee/volunteer**