

Authorization for Criminal Records Check

To: Applicant

Please complete this information sheet and submit it with your application for volunteer work with the Clackamas County Juvenile Department. The existence of a criminal record will not necessarily disqualify you for work. Any criminal record will be individually considered on the basis of how it relates to the work which you would prefer for the Department.

	Last	First	Full Middle Name
Addres	S: Address	City	State - Zip
Social S	Security Numbe	er:	Birth-date:
SECTIO	N 1·		
SECTIO		the State of Oregon in the pa	ast 10 years? ☐ No ☐ Yes
Have you	resided outside of t states in which yo		ast 10 years? ☐ No ☐ Yes ☐ No ☐Yes

SEC	ΓΙΟΝ 2:		
The fo	ollowing questions are related to the Prison Rape Elimination A	Act (PREA) s	tandards.
1)	Have you engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	☐ No	☐ Yes
2)	Have you 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 no consent or was unable to consent or refuse?		□Yes
3)	Have you been civilly or administratively adjudicated to have engaged in the activity described above in question number five?	□ No	□Yes
	answer to any of the above questions is "yes", explain below.	You can us	e additional
SEC	ΓΙΟΝ 3:		
know Clack misre	ining, I verify that the information provided herein is true and ledge. I understand that an investigation of my criminal histonames County Juvenile Department or its agent. I further under presentation or omission on this addendum to the application alification of the application or dismissal from my work.	ry may be m rstand that	nade by the

Applicant's Signature

Date