## Permission to Obtain a Background Check

(This form authorizes the Diakon Community Services to obtain background information and must be completed by the applicant. Diakon must keep this completed form on file for at least two years after requesting a background check.)

I, the undersigned applicant (also known as "consumer"), authorize **Diakon Community Services** to procure a criminal history record check about me. The Pennsylvania Access to the Criminal History (PATCH) system enables "individuals and the public to obtain criminal record checks. The response to the request for a criminal history background check provided by this system is based upon a comparison of data provided by the requestor against information contained in the files of the Pennsylvania State Police Central Repository only. This response is valid only at the date and time of the request. The Pennsylvania State Police Response does not preclude the existence of criminal records which might be contained in the repositories of other Local, State or Federal Criminal Justice Agencies. Once a criminal history check has been requested, one of the following possible responses will be immediately received: Pending, No Record, or Request Under Review." https://epatch.state.pa.us/Home.jsp. I understand that I am entitled to a complete copy of any background information report of which I am the subject upon my request to Diakon Community Services if such is made within a reasonable time from the date it was produced. Signature: Date: \_\_\_\_ I would like a copy of the report. **Identifying Information for Criminal History Record Check** Print Name: \_\_\_\_\_ First Middle Last Other Names Used (alias, maiden, nickname): Current Address:

State

State

Zip Code

Zip Code

County

County

**Dates** 

Dates

Date of Birth: Gender

City

City

Street /P. O. Box

Street /P. O. Box

Former Address: