



УКРАЇНСЬКА КАТОЛИЦЬКА ЄПАРХІЯ У СТЕМФОРДІ  
UKRAINIAN CATHOLIC EPARCHY OF STAMFORD

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Stamford, CT 06902  
USA

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*Background Investigation Consent*

I, \_\_\_\_\_ hereby authorize the Eparchy of Stamford and its authorized agents to make an independent investigation of my background for the purpose of deciding my suitability as an employee or volunteer for the work of the Eparchy. This background check shall consist of social security and identity verification, a check of state or national criminal files, and a check of state registries for sexual offenders.

I release the Eparchy of Stamford and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or lawsuits in regards to the information obtained from any and all of the above referenced sources used.

The following is my true and complete legal name and all information is true and correct to the best of my knowledge.

\_\_\_\_\_  
Full Name (**Print All Fields**)

\_\_\_\_\_  
Maiden Name or Other Names Used

\_\_\_\_\_  
Present Address

\_\_\_\_\_  
How Long

\_\_\_\_\_  
City/State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date