

Authorization for Release of Criminal History Record Information

I _____ authorize the Department of Labor (DOL), through its background investigation services provider, to conduct a criminal history record information (CHRI) check, known herein as “background check,” for purposes of determining my eligibility for the Job Corps program under the Workforce Innovation and Opportunity Act, 29 U.S.C. § 3191, et seq. The Defense Counterintelligence and Security Agency (DCSA) performs background checks and other investigative services for Federal agencies, including DOL.

I further authorize any investigator, special agent, or other duly accredited representative of DOL and/or DCSA to request and receive CHRI about me from criminal justice agencies, or other appropriate record custodians, for the purpose of determining my eligibility for Job Corps, in accordance with 29 U.S.C. § 3195 and Executive Order 13869, Sec. 2(c)(v).

The collection, maintenance and disclosure of background check information is governed by the Privacy Act. I understand that the background check information received will be maintained, by both DOL and DCSA, in accordance with the Privacy Act, in their respective records system.

I acknowledge that I received the Job Corps Privacy Act Statement, which explains how background check information will be maintained and used by DOL.

Within DCSA, the background check will be maintained in the Department of Defense Personnel Vetting Records System, “DUSDI 02-DoD”. I understand that I may request a copy of the DCSA background check records as may be available to me under the law. I also understand the background check records maintained by DCSA may be disclosed without further consent to DCSA personnel and shared with other authorized recipients for routine uses, and, for other purposes permitted under subsection (b) of the Privacy Act of 1974, as amended (5 USC §552a). The most common routine use pertains to personnel vetting investigations, determinations, and adjudications. A complete list of the routine uses can be found in the “DUSDI 02-DoD” system of records notice at: <https://www.federalregister.gov/documents/2018/10/17/2018-22508/privacy-act-of-1974-system-of-records>. Any information gathered pursuant to this background check may be disclosed by the Government only as authorized by law.

INFORMATION RELEASE AUTHORIZATION:

I understand that disclosure of the personal information below is voluntary; and that failure to provide the required information may result in DOL and DCSA's inability to complete a background check and may prevent DOL from making a determination regarding my eligibility for Job Corps.

My signature below authorizes the release of the requested background check information. This authorization remains in effect for a period of 1 year from the date signed. A copy of this authorization shall have the same force and effect as the signed original.

Full Legal Name of Applicant (Print):

LAST

FIRST

MIDDLE

Applicant Date of Birth (MM/DD/YYYY): _____

Applicant Signature: _____

Date signed: _____

Signature of Parent or Guardian (if applicant is under 18 years of age): _____

Date signed: _____