



**CRIMINAL HISTORY BACKGROUND  
REPORT AUTHORIZATION**

*Revised and effective June 2021*

Ronald McDonald House Charities of the Piedmont Triad, Inc. (“RMHCPT”) conducts a criminal history background check on all individuals (18 years old or older) applying for temporary residence at RMHCPT. In selecting family members for temporary residence, RMHCPT screens family behavior and an individual’s suitability for temporary residence among other families. A criminal conviction record which reveals behavior that may adversely affect another individual’s (e.g., other temporary residents, guests, staff, volunteers) health, safety, welfare, and ability to peacefully enjoy the RMHCPT facility shall result in your application for temporary residence being denied.

This form includes a Criminal History Background Report Authorization form for you to review and sign. Each family member or overnight visitor (18 years old or older) who intends to apply for temporary residence must separately fill out this form and the Criminal History Background Report Authorization form. Once we receive the completed form, RMHCPT will have an independent third party conduct a criminal history background check.

RMHCPT will attempt to obtain and use a criminal history background “consumer report” from a “consumer reporting agency” when considering your application for temporary residence while your child (or family relation) is receiving medical treatment at Brenner Children’s Hospital, Forsyth Medical Center, or another area medical facility. These quoted terms are defined in the Fair Credit Reporting Act (“FCRA”), a law which RMHCPT deems to apply to you.<sup>1</sup> As an applicant for temporary residence at our facility, RMHCPT is considering you to be a “consumer” with rights under the FCRA.

**Please understand that RMHCPT solely will obtain a criminal history background report to assist it in determining whether to grant you temporary residence. RMHCPT is not obtaining a “consumer report” for any other information and will NOT be conducting a credit check.**

If RMHCPT considers any information in the criminal history background report when making a temporary residence decision that directly and adversely affects you, upon request you will be provided with a copy of that report. You also may contact the Federal Trade Commission about your rights under the FCRA as a “consumer” about “consumer reports” and “consumer reporting agencies.”

To assist RMHCPT in obtaining criminal history background check information, please truthfully and completely answer the following question:

Have you ever been convicted of ANY misdemeanor (other than moving vehicle or parking violations) or felony? For purposes of this inquiry, the word “convicted” includes, without limitation, pleading guilty, pleading no contest, or having a judicial finding of guilt.

Yes  No

If Yes, please list the criminal offense, the date(s) of the conviction and where (city, state, country) the conviction took place. Please use additional paper if necessary

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<sup>1</sup> A “consumer reporting agency” is a person or business that, for monetary fees, dues or on a cooperative nonprofit basis, regularly assembles or evaluates consumer credit information or other information on consumers for the purpose of furnishing “consumer reports” to others, such as RMHCPT. A “consumer report” is any written, oral, or other communication of any information by a “consumer reporting agency” bearing on a consumer’s credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, motor vehicle record, or mode of living that is used or collected for the purpose of serving as a factor in establishing the consumer’s eligibility for the particular purpose at hand. A “consumer report” also may include, without limitation, information about your employment history, educational background, or your criminal history background.

To assist you in truthfully and completely answering this form, please be advised your application will be in jeopardy if you have been convicted of any of the following criminal offenses (whether or not the offense may have been labeled in another way in your state or country of residence). This list is not all-inclusive.

- All felony convictions, including assault, drugs, and theft.
- Any crimes against a child (pending charge or conviction)
- Violent crimes including murder, arson, or voluntary manslaughter (pending charge or conviction)
- Any crimes of a sexual nature, including indecent exposure (pending charge or conviction)
- Any domestic violence crimes (pending charge or conviction)
- More than two misdemeanors in the same category in the past 5 years, with categories defined as assault crimes, drug crimes or theft crimes.

RMHCPT, in its sole discretion, will determine whether your criminal record may threaten an individual's health, safety, welfare, and ability to peacefully enjoy the RMHCPT facility and, therefore, result in your application for temporary residence being denied. You are required to promptly notify RMHCPT's Guest Services Manager or Chief Operations Officer if your answer to the above-referenced questions needs to be updated.

RMHCPT will in addition make an overall decision whether the rest of your family will be eligible to stay based on their individual checks.

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I certify that all the above-provided information is accurate, complete and can be verified. I agree and understand that any falsification, misrepresentation, or omission may disqualify me from seeking temporary residence at RMHCPT; or if temporary residence already has been granted, then, it will subject me to immediate expulsion from RMHCPT whenever the falsification, misrepresentation or omission is discovered. I also understand that while RMHCPT will obtain criminal history background information on potential temporary residents, it cannot and does not guarantee the personal safety of any temporary resident, guest, visitor, or staff member.

#### AUTHORIZATION

By signing below, I knowingly and voluntarily authorize the RMHCPT to obtain a criminal history background report from a "consumer reporting agency" and to consider that report when determining whether to grant me temporary residence at RMHCPT. I understand I have rights under the FCRA, including the rights discussed in the FCRA Summary of Rights. I acknowledge having been given the opportunity to review the FCRA Summary of Rights and being provided a copy if requested. This Authorization shall remain on file and shall serve as ongoing authorization for RMHCPT to obtain criminal history background reports on me whenever I apply for temporary residence at RMHCPT.

\_\_\_\_\_  
Name (signature)

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Full Name (print) First Middle Last

\_\_\_\_\_  
Date of Birth (month, day, year)

Any previous name (e.g. Maiden name): \_\_\_\_\_

Home Address (residence address, city, state, country, zip code)  
\_\_\_\_\_

Contact number: \_\_\_\_\_

Name of patient child: \_\_\_\_\_

Relationship to patient child: \_\_\_\_\_