



A non-profit organization dedicated to international understanding and language education

Criminal Background Check Host Family Authorization Form

Your family has applied to host a foreign student as part of an exchange program. The U.S. Department of State regulations require that all adult members of a prospective host family undergo a criminal background check. [You are not required by law to complete this form. However, if each person over the age of 18 residing in your household does not complete and submit this form to Nacel Open Door, your family will not be allowed to proceed with the Nacel Open Door hosting application or placement process.]

I, _____, hereby authorize Nacel Open Door to conduct

(Please print full name clearly)

a national criminal background check on my behalf, and I am providing my full name, address, date of birth, and social security number in order to do so. I authorize the disclosure of criminal history record information on file in local, state or federal agencies to Nacel Open Door, for the purpose of becoming eligible to be a host family, in accordance with the requirements of the United States Department of State governing J-1 Secondary School exchange programs. I understand that any results from the check will be subject to review by Nacel Open Door program staff, as well as prospective exchange students and their natural parents, for their ultimate approval or denial of placement with me/my family. The consent given by this authorization form is ongoing until revoked by me in writing. Nacel Open Door may have access to the updated findings of my criminal background check each time I apply to be a host family without the need for a new authorization.

In addition, I release and discharge Nacel Open Door and its vendor and associates to the full extent permitted by law from any claims, damages, losses, liabilities, costs, expenses or any other charge or complaint filed with any agency arising from retrieving and reporting this information. I understand that according to the Federal Fair Credit Reporting Act, I am entitled to know whether employment (hosting) was denied based upon the information obtained and to receive, upon written request, a disclosure of the background report. I also understand that I may request a copy of the report from Nacel Open Door.

Social Security Number: _____ (CBC cannot be processed without an SSN)

Full Name:

First: _____ Middle: _____

Last: _____ **Date of Birth:** _____ (Month/Day/Year)

Maiden / Other names or aliases by which you have been known: _____

Current Address:

Street: _____ (No PO Box addresses, please)

City, State, Zip: _____

County: _____

Phone number where I can be reached to complete or confirm any of the above information: _____

I hereby confirm that the information provided above is accurate and complete. I understand that any omission or falsification may be grounds for rejection of my host family application.

Signature

Date

The Authorization Form will be kept in secure confidence by Nacel Open Door. The information on the Form will be used by Nacel Open Door only for the purposes of completing the required background check, and the information will not be sold, published, or otherwise distributed by Nacel Open Door in any way.