



Diocese of Gary
 HR/Benefits Office
 9292 Broadway, Merrillville, IN 46410
 219-769-9292, ext.292
 FAX 219-650-4265

**Request for OUT OF STATE - NATIONAL
 Criminal History Information**
**Complete this page ONLY if you have been
 a resident of Indiana for less than five (5) years.**
**ALL INFORMATION MUST
 BE TYPED OR PRINTED**

Full Legal Last Name _____ Legal First Name _____ Legal Middle Name _____

Social Security Number _____ - _____ - _____

Date of Birth _____ / _____ / _____ Gender: Male Female
 Month Day Year

Race: American Indian/Alaskan Asian/Pacific Black Multi-Racial White
 Hispanic

OUT-OF-STATE StreetAddress _____

City _____ State _____ Zip Code _____

Phone Number _____

Parish/School Affiliation(s) _____ City _____

I am involved in my diocese/parish/school as a: (Choose primary involvement & check box)

- Volunteer (non-salaried person)** Parish Ministry Parent Volunteer Youth Ministry
 DRE Catechist Catechist Aide Coach _____
- Parish Employee (salaried person employed by parish)** Rectory personnel Secretary DRE
 Pastoral Associate/Parish Ministry Business Manager Youth Ministry Parish/school support staff
- Educator (salaried teacher/principal in a diocesan Catholic school)**
- Candidate for ordination** (seminarians, candidates for seminary, candidate for deaconate over age of 18)
- Clergy** **Deacon** **Diocesan Employee** (Pastoral Center Employee)

I authorize the Diocese of Gary to submit the above information for a National Criminal Background

Check for a fee of \$5.00. Check or money order payable to **Diocese of Gary. Please, no cash.**

Attach check/money order to this form: Amount: \$ _____ Check No. _____

Signature

Date

All information on this form will be kept strictly confidential.

This form is submitted by: _____

Parish/School: _____