PA ACT 153 BACKGROUND CLEARANCE FORM
PLEASE PRINT LEGIBLY

Legal First Name: _____
(No nicknames)

Middle Name: _____

Last Name: _____

Andrew ID: _____
(Write N/A if no affiliation)

Affiliation:
☐ Faculty
☐ Staff
☐ Student
☐ Volunteer/No Affiliation

Date of Birth: _____ / _____ / _____
MM / DD / YYYY

Sex: *(Optional)*
☐ Female
☐ Male
☐ I do not wish to answer

Race: *(Optional)*
☐ American Indian or Alaska Native
☐ Asian
☐ Black or African American
☐ Native Hawaiian or Other Pacific Islander
☐ White
☐ I do not wish to answer

Division:
☐ Carnegie Institute of Technology (CIT)
☐ College of Fine Arts (CFA)
☐ Dietrich College of Humanities & Social Sciences (DC)
☐ Finance Division
☐ Girls of Steel Robotics
☐ Heinz College (HC)
☐ Marketing & Communications
☐ Mellon College of Science (MCS)
☐ Office of General Counsel (OGC)
☐ Operations Division
☐ President's Office

☐ Provost's Office (incl. ETC and IDeATe)
☐ School of Computer Science (SCS)
☐ Software Engineering Institute (SEI)
☐ Student Affairs (incl. Athletics, etc.)
☐ Temporary Employment Service (TES)
☐ Tepper School of Business (TSB)
☐ University Advancement
☐ University Libraries
☐ None
☐ Other: _____

Who at CMU referred you for a background certification (supervisor, sponsor, etc.)?

Name: _____

Andrew ID: _____

Which group or individual referred you for a background certification?
☐ Child Protection Operations / Leonard Gelfand Center
☐ SLICE / Student Activities
☐ Athletics Department
☐ My Supervisor or Business Manager (staff/faculty)
☐ None/Other (please explain):
_____

What is the reason for your background certification?
☐ Work (employment) with children at CMU
☐ Volunteer/participate in CMU-sponsored event for children (please list below):
_____

By signing below, I hereby authorize Carnegie Mellon University to enter the above listed information into the EPATCH system on my behalf to complete the PA state criminal history check.

_____
Signature

_____
Date *(MM / DD / YYYY)*