

**The Gulf Coast Center
Authorization for Contract Provider
Background Check**

I _____ hereby grant permission to The Gulf
(Please print full name here)

Coast Center to conduct a background check. I understand that a background check will only be conducted if I am selected as a provider of services.

I agree and understand that the background check consists of four parts: a criminal background check, a work reference verification of past employers, traffic check and a misconduct registry search. All information is ***CONFIDENTIAL*** and will not be shared with anyone, other than the individual and family to whom I am providing supports to and Gulf Coast Center staff, without my written consent.

Consistent with the Texas Health and Safety Code, 250.006, convictions of criminal offenses with constitute an absolute bar to employment include; criminal homicide, kidnapping and unlawful restraint, indecency with a child or continuous sexual abuse of a young child or children or disabled individual; abandoning or endangering a child, aiding suicide, agreement to abduct from custody, sale or purchase of a child, arson, robbery, aggravated robbery, indecent exposure, improper photography or visual recording, deadly conduct, aggravated sexual assault terrorist threat, online solicitation of a minor, money laundering Medicaid fraud, cruelty to animals or a conviction under the laws of a State, Federal Law, or a Military Justice for an offense containing elements that are substantially similar to the elements of an offense listed by this subsection. Other criminal convictions such as sexual offenses, drug related offenses, assault, battery, theft, or any other crime involving personal injury or threat to another person shall make me ineligible to serve in a position of direct contact with individuals who receive services or support from The Gulf Coast Center.

Date of Birth Sex Race

Street Address City State Zip

Social Security Number Drivers License State

Signature Date

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Telephone number

DO NOT WRITE BELOW THIS LINE - PERSONNEL USE ONLY

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NAME _____

Page # _____

Criminal Check:

Searched criminal background at www.dps.com on _____

Applicant is _____

Excluded Employee Database Search – needed Employee misconduct, Nurses Aid and OIG

Web Search includes the following registries:

Employee Misconduct _____

OIG website _____

Nurse Aid _____

Medication Aide _____

Nursing Facility Administrator _____

Date Website Searched _____ Applicant is _____

Background searched by _____

Hire Status: Eligible _____ Not Eligible _____

Updated Background Check

Criminal Check:

Searched criminal background at www.dps.com on _____

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