

Instructions for the 123B.03 Background Check

Minnesota State Law requires that **all school employees and volunteers (including Catholic schools)** have a 123B.03 background check **in addition to the standard background check.**

- ◆ Minnesota State 123B.03 pertains *exclusively* to schools. It is a check of records through the Minnesota Bureau of Criminal Apprehension (BCA).
- ◆ Parishes are not required to run the 123B.03 background check on employees or volunteers who do not work or volunteer in a school.
- ◆ The 123B.03 is only run one time.
- ◆ This process cannot be done online through VIRTUS.

123B.03 Informed Consent Form

The school name is required in all four fields, as noted.

123B.03 and the Minnesota Predatory Offender Registry
INFORMED CONSENT

THE MCDOWELL AGENCY, INC.
INVESTIGATION & PRE-EMPLOYMENT SCREENING

The following named individual has made application for employment or volunteer service with an organization, _____ in _____, which utilizes The McDowell Agency to run criminal background checks.

Name of school or parish City

Last Name of Applicant (please print): _____
First Name (please print): _____
Middle (full) (please print): _____
Maiden, Alias or Former (please print): _____
Date of Birth: _____ Sex (M or F): _____
MM/DD/YYYY

I authorize the Minnesota Bureau of Criminal Apprehension to disclose all criminal history record information to The McDowell Agency and to _____ pursuant to Minnesota State Statute 123B.03 for the purpose of employment or volunteer service at the organization named above which utilizes the services of The McDowell Agency.

Name of school or parish

This release is valid for one year from the date of my signature.

Signature of Applicant _____ Date _____

I hereby authorize and grant my informed consent to the Minnesota Bureau of Criminal Apprehension to release to The McDowell Agency and to _____ any information contained about me in the Minnesota Predatory Offender Registry, including, but not limited to, information related to offenses which may have occurred when I was a juvenile.

Name of school or parish

I hereby release the Minnesota Bureau of Criminal Apprehension and The McDowell Agency and the _____ from any and all actions and causes of action, of any kind and nature whatsoever, past, present and future, arising out of the release of information obtained with this consent.

Name of school or parish

This release is valid for one year from the date of my signature.

Signature of Applicant _____ Date _____

123B.03 Informed Consent Form
Archdiocese of Saint Paul and Minneapolis, Office of Ministerial Standards and Safe Environment
REVISED: October 2019

The applicant must sign and date both signature areas.



The following standards must be followed, or the BCA will not process the 123B.03 form:

- The submitted 123B.03 form must be only one (1) page.
- The form must have the same school name as the original background check.
- The dates need to include the month, day and year.
- The form must be processed within 365 days of the date signed by the applicant.
- All written text must be legible.
- The signatures need to be actual wet (written) signatures. The BCA will not accept e-signatures or signatures that are typed.
- The applicants write their correct GIVEN names and include any and all aliases. Additional names cannot be written in by the school. For example: If the applicant writes JIM on the form and his name is actually JAMES, he must write both JIM and JAMES. The school cannot write in JAMES on his behalf. In this example, the BCA will only run the JIM name; thus, the information that may be on JAMES' record will not show up because he only wrote JIM and the BCA only ran JIM.

Email completed forms to **admin@mcdowellagency.com**
or fax to **651-644-3877**

123B.03 and the Minnesota Predatory Offender Registry
INFORMED CONSENT



THE MCDOWELL AGENCY, INC.
INVESTIGATION & PRE-EMPLOYMENT SCREENING

The following named individual has made application for employment or volunteer service with an organization, _____ in _____, which utilizes The McDowell Agency to run criminal background checks.

Name of school or parish

City

Last Name of Applicant (please print): _____

First Name (please print): _____

Middle (full) (please print): _____

Maiden, Alias or Former (please print): _____

Date of Birth: _____
MM/DD/YYYY

Sex (M or F): _____

I authorize the Minnesota Bureau of Criminal Apprehension to disclose all criminal history record information to The McDowell Agency and to _____
Name of school or parish

pursuant to Minnesota State Statute 123B.03 for the purpose of employment or volunteer service at the organization named above which utilizes the services of The McDowell Agency.

This release is valid for one year from the date of my signature.

Signature of Applicant _____ **Date** _____

I hereby authorize and grant my informed consent to the Minnesota Bureau of Criminal Apprehension to release to The McDowell Agency and to _____
Name of school or parish

any information contained about me in the **Minnesota Predatory Offender Registry**, including, but not limited to, information related to offenses which may have occurred when I was a juvenile.

I hereby release the Minnesota Bureau of Criminal Apprehension and The McDowell Agency and the _____ from any and all actions and causes of action, of
Name of school or parish

any kind and nature whatsoever, past, present and future, arising out of the release of information obtained with this consent.

This release is valid for one year from the date of my signature.

Signature of Applicant _____ **Date** _____