Background Check Account Creation Form

This form is used to request that Truescreen, AU's background check vendor, create an account for a Youth Program. Once the program's account has been created, the Requester will be provided log-in information for the background check portal. **Submit this form to youthprotection@auburn.edu.**

Name of Program: _____

Sponsoring Unit: The AU department offering the program or allowing the Third-Party Program to use AU facilities.

Sponsoring Unit: _____

Type of Program: If this is a program offered by a student-run organization or an External Entity, choose "Third-Party Program." An example of this would be a camp that is using AU facilities but is operated by an LLC.

AU Program ☐

Third-Party Program ☐

Requester: The person who will enter the names and contact information of all workers/volunteers for whom background checks are required, who will be responsible for sending notifications and instructions regarding the background check system, and who will monitor the site to determine that the workers/volunteers have complied.

Requester Name: _____

Requester Title: _____

Requester Email: _____

Requester Phone: _____

Requester Mailing Address: _____

Billing Contact: The person/entity financially responsible and who will receive the invoice for the background checks.

Billing Contact Name: _____

Billing Contact Title: _____

Billing Contact Email: _____

Billing Contact Phone: _____

Billing Contact Mailing Address: _____

Do you need an option for individual workers/volunteers to pay for their own background checks? ☐ **Yes** ☐ **No**

Submit this form to youthprotection@auburn.edu.