



# Michigan Lutheran High School

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## CRIMINAL BACKGROUND CHECK HOST FAMILY AUTHORIZATION

Your family has applied to host a foreign student as part of Michigan Lutheran High School’s International Student program. The US Department of State regulations require that all adult members of prospective host family undergo a criminal background check (CBC). However, if each person over the age of 18 residing in your household does not complete and submit this form to Michigan Lutheran High School, your family will not be allowed to proceed with the hosting application or placement process.

I, \_\_\_\_\_, hereby authorize Michigan Lutheran High School (hereafter to be referred to as MLHS) to conduct a national criminal background check on my behalf, and I am providing my full name, address, date of birth, and social security number in order to do so. I authorize the disclosure of criminal history record information on file in local, state, or federal agencies to MLHS for the purpose of becoming eligible to be a host family, in accordance with the requirements of MLHS. I understand that any results for the check will be subject to review by MLHS program staff, as well as prospective exchange students and their natural parents, for the ultimate approval or denial of placement with me/my family. The consent given by this authorization form is ongoing until revoked by me in writing. MLHS may have access to the updated findings of my criminal background check each time I apply to be a host family with the need for a new authorization.

In addition, I release and discharge MLHS and its associates to the full extent permitted by law from any claims, damages, losses, liabilities, costs, expenses or any other charge or complaint filed with any agency arising from retrieving and reporting this information. I understand that according to the Federal Fair Credit Reporting Act, I am entitled to know whether employment (hosting) was denied based upon the information obtained and to receive, upon written request, a disclosure of the background report. I also understand that I may request a copy of the report from MLHS.

**Social Security Number:** \_\_\_\_\_ (CBC cannot be processed without a SSN)

**Full Name** First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

**Have you been known by other names?** (maiden or alias) \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ (MM/DD/YYYY) **Phone Number for Verification:** \_\_\_\_\_

**Current Address:**

Street \_\_\_\_\_ (No PO boxes)  
City, State, Zip \_\_\_\_\_  
County \_\_\_\_\_

*I hereby confirm that the information provided above is accurate and complete. I understand that any omission or falsification may be grounds for rejection of my host family application.*

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**