Authorization and Request for Criminal Records Check (Form #3)

Church to request any appropriate agency, company, or possession of the agency, company, or organization regardonvictions contained in its files, or in any criminal file local, state or national file, including but not limited to a committed against minors, to the fullest extent permitted. Furthermore, I do release said agency, company, or organization any such disclosure made in response to this requestion.	organization to release information in arding any record of criminal charges maintained on me, whether said file in accusations and convictions for crime of by state and federal law.	or s a
Signature of Applicant	Date	
Print applicant's full name:		
	State: Zip:	
Applicant's e-mail address:		
Applicant's ethnic background:		
Print all other names that have been used by applicant (i	if any):	
Date of birth: Place of birth:		
Social Security number:		
Driver's license number:	State issuing license:	
License expiration date:	_	
CRIMINAL RECORDS CHE	CK REQUEST	
In the furtherance of completing an criminal background respectfully requests any and all information as described below agency, company, or organization regarding the a	ed above maintained or possessed by	
Agency, Company, or Organization from which informa	ation is requested:	
Bethel United Methodist Church representative:		