

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

I, _____, hereby authorize Bethel United Methodist Church to request any appropriate agency, company, or organization to release information in the possession of the agency, company, or organization regarding any record of criminal charges or convictions contained in its files, or in any criminal file maintained on me, whether said file is a local, state or national file, including but not limited to accusations and convictions for crimes committed against minors, to the fullest extent permitted by state and federal law.

Furthermore, I do release said agency, company, or organization from all liability that may result from any such disclosure made in response to this request.

Signature of Applicant Date

Print applicant's full name: _____

Print all other names that have been used by applicant (if any): _____

Date of birth: _____ Place of birth: _____

Social Security number: _____ - _____ - _____

Driver's license number: _____ State issuing license: _____

License expiration date: _____

CRIMINAL RECORDS CHECK REQUEST

In the furtherance of completing an criminal background check, Bethel United Methodist Church respectfully requests any and all information as described above maintained or possessed by the below agency, company, or organization regarding the above individual

Agency, Company, or Organization from which information is requested: _____

Bethel United Methodist Church representative: _____

Date Requested: _____