ICHAT AUTHORIZATION

As a proactive measure for the safety of our children and compliance with our governing agencies, we will be conducting background checks on all of our volunteers working with anyone under the age of 18 in our church family. The backgrounds will be held confidentially by the Children's Ministry Coordinator. Background checks are completed through the State of Michigan. Please fully complete this form, sign it and return it to Amy Falkowski within two weeks.

Thank you for your cooperation and your choice to work with our children at New Life Community Church!

PLEASE PRINT VERY CLEARLY

Last name _____ First Name _____ Middle Initial _____

Race: (Choose one)
White
Black
Asian or Pacific Islander
American Indiana/Alaskan Native
Unknown/Other

Sex: (Choose one)
Male
Female

Month of Birth _____ Day of Birth _____ Year of Birth _____

Other Last Names (includes maiden/hyphenated) _____ Other First Names _____ Other Mid. Int _____

_____ _____ _____

_____ _____ _____

**I understand NLCC is going to check my background with the State of Michigan and the information will be held in confidence.

_____ _____
Signature Date