Criminal Background Check Authorization Form and Disclosure Notice

THIS SECTION TO BE COMPLETED BY APPLICANT

Last Name First Name Middle Initial Maiden Name

Other names(s) used in any and all other records of birth or records of residence

Address Apt # City State Zip Code County

Date of Birth* Social Security Number Gender* Race* Driver's License Number & Issuing State

To be used solely for the purpose of conducting a background check.

In connection with my application for church employment, my continued employment, or in connection with my desire to engage in volunteer activities, I have been advised and I hereby consent and authorize _____ to obtain a background check, that may include, but not be limited to, social security number verification, a criminal record check, employment and education verifications, verifications of personal reference and reputation; and driving record.
Credit history will not be obtained.

I acknowledge that facsimile, copy or email of this document shall have the same validity, force and effect as the original.

The following are my responses to questions about my criminal history, if any. (Exclude minor traffic offenses punishable only by fine)

IF YOU ANSWER YES TO ANY OF THE FOLLOWING QUESTIONS, PLEASE ATTACH DETAILS ON A SEPARATE SHEET OF PAPER TO INCLUDE THE STATE, COUNTY, DATE OF OFFENSE, AND DETAILS OF THE CONVICTION.

		YES	*NO*
1.	Have you ever been convicted or plead guilty before a court for any federal, state or municipal criminal offense? (If yes, attach an extra page with the details including state, county, date of offense and details of conviction)	☐	☐
2.	Have you ever received deferred adjudication or similar disposition for any federal, state or municipal offense? (If yes, attach an extra page with the details including state, county, date of offense and details of the disposition)	☐	☐
3.	Have you ever received pretrial diversion or similar disposition for any federal, state or municipal offense? (If yes, attach an extra page with the details including state, county, date of offense and details of the disposition)	☐	☐
4.	Have you ever received probation or community supervision for any federal, state or municipal offense? (If yes, attach an extra page with the details including state, county, date of offense and details of the disposition)	☐	☐
5.	Have you ever been convicted of any criminal offense in a country outside the jurisdiction of the United States? (If yes, attach an extra page with the details including state, county, date of offense and details of conviction)	☐	☐
6.	As of the date of this consent form, do you have any pending charges against you? (If yes, attach an extra page with the details including state, county, date of offense and details)	☐	☐

I hereby certify that all information provided in this background check disclosure notice and authorization form is true, correct and complete to the best of my knowledge.

Signature of applicant Print Name Date

Applicant contact information: _____

Email address Phone number