

# 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.**

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

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