

# AUTHORIZATION AND REQUEST FOR BACKGROUND AND CRIMINAL RECORDS CHECK

I, \_\_\_\_\_, hereby authorize St. Luke's Lutheran Church and/or its agents to make an independent investigation of my background, character, employment, criminal and other records and request the appropriate authorities (federal, state or local law enforcement agencies and private organizations) to release information for the purpose of confirming the information in my application and/or other information, including any record of 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, and including but not limited to accusations and convictions for crimes committed against minors, to the fullest extent permitted by state and federal law. I do release St Luke's Lutheran Church and/or its agents and any person or entity which provides information pursuant to this authorizations from any and all liability, claims or lawsuits that may result from any such disclosure made in response to this request.

Print Full Name: \_\_\_\_\_

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

\_\_\_\_\_

Resident Address

(street ) \_\_\_\_\_

(city, state, zip) \_\_\_\_\_

How long at this address? \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ Issuing State: \_\_\_\_\_ License Expiration Date: \_\_\_\_\_

Email address \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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## St Luke's Record of Request:

Request sent for processing to: \_\_\_\_\_ On Date: \_\_\_\_\_

By Name: \_\_\_\_\_