

CONFIDENTIAL

Background Check Authorization

Print Name: _____
(First) (Middle) (Last)

Former Name(s) and Dates Used: _____

Current Address Since: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: _____
(Mo/Yr) (Street) (City) (Zip/State)

Social Security Number: _____ Date of Birth: _____

Telephone Number: _____

Drivers License Number/State: _____

E-mail: _____

Have you ever been found guilty of or been convicted of any criminal act in the state of Missouri or any state? _____ Yes (complete section below) _____ No

Date	City	State	County	Circumstances

Have you been substantiated as a perpetrator in any child abuse or neglect report made in the state of Missouri or any state? _____ Yes (complete section below) _____ No

Date	City	State	County	Circumstances

The information provided is complete and accurate to the best of my knowledge. I authorize Northside Christian Church to conduct a comprehensive review of my background to be generated for employment and/or volunteer purposes. This includes a criminal records check for arrests, convictions or other information the Missouri Highway Patrol, Missouri Department of Social Services and any other local, state, or federal criminal enforcement agency may have regarding me, and release such information to Northside Christian Church and its agents.

I release Northside Christian Church and above mentioned agencies from any liability of damages resulting from the release of this information. I waive any present or future claims of privacy resulting from this information for qualifications of volunteer work or employment with Northside Christian Church.

Signature of Applicant Date