

## BACKGROUND CHECK AUTHORIZATION FORM

Legal First Name	gal First Name Middle Last				Other	Other Names Used (ex. Maiden, Nickname)		
Phone Number			Email					
Н	C							
Address			City			State	Zip	
Social Security Number		Birthdate		(	Gender:			
	_			ı	Male	Female		
Reason for the Background C	Check							
, ,		Paid Childcare Wo			Staff Memb		Facilities/Safety	
NextGen Volunteer  Elder		Service Programn Resident/Intern	ing Team		Mission Participant Care Volunteer		Local Outreach Celebrate Recovery	
for employment or volunteer reporting agency as defined criminal history, driving and/time after receipt of this Disc course of my employment of the right, upon written requenature and scope of any involuntarily ACKNOWLEDGEMENT ABy signing below, I voluntarily	by the Fair or motor vehilosure and Au r volunteer se st made with estigative con 119-5581. For	Credit Reporting icle records and suthorization and if ervice, as permitted in a reasonable and issumer report to For info about Prote ORIZATION	g Act. The social security I am hired or ed by law and nount of time Protect My Ministr	report in number serve as lunless after the linistry, ry's priva	may contain r verifications a voluntee revoked by the receipt of lnc., 14499 acy practice	n information on. Such report r, whichever is me in writing. f this notice, to O N. Dale Mab es, see www.pro	about me relating to my is may be obtained at any applicable, throughout the I understand that I have to request disclosure of the ry Hwy., Suite 201 South, tectmyministry.com.	
I understand that I am entitle	ed to a comp	olete copy of any	background					
to Grace Bible Church, if si receive a written summary of					ite it was p	oroduced. I als	so understand that I may	
Signature (Please Print a H	ard Copy & S	Sign)			Da	te		
Ministry Leader Name					- Re	office Use Only check Fu	rther Review	
					CI	ear		