

CALVARY CHURCH



connecting people with God

Authorization for Criminal Records Check

Today's Date: _____

Print Name: _____
LAST FIRST MIDDLE

Print all other names you have used including nicknames, maiden name, or previous married names: _____

Address: _____
STREET CITY STATE ZIP

Home Phone: () _____ Cell Phone: () _____

Email Address: _____

Gender: Male Female Date of birth: _____ Place of birth: _____

Social Security #: _____

Driver's license #: _____ State issuing license: _____

Last three counties of residence (including current location): _____

What ministry area is requiring this Criminal Records Check? Children Youth Security Other: _____

Have you ever been convicted of, pled guilty to, or are charges pending concerning any crime, either a felony or a misdemeanor (except for minor traffic violations)? Yes No If yes, please explain: (Attach a separate sheet of paper, if necessary.) _____

I, _____, hereby consent and authorize CALVARY CHURCH or its agents to prepare an investigative consumer report for employment purposes. (Employment as it pertains to this document is defined as anyone working in a paid or unpaid position.) This report may include criminal record checks at the county, state and federal levels, sex offender registries, and a social security number search. This consumer report will be used for employment purposes only as it is defined in the Fair Credit Reporting Act, section 603 (h). **In using a consumer report for employment purposes, before taking any adverse action based in whole or in part on the report, the person intending to take such adverse action shall provide to the consumer to whom the report relates, a copy of the report and description in writing of the rights of the consumer under the FCRA, as prescribed by the Federal Trade Commission, section 609 (c)(3).** I have provided the previous information for the preparation and proper verification of the investigative consumer report.

Signature of Applicant _____

Date _____