

Crosswater
community church
Permission for Background Check

Office Use Only	
Date Filed _____	
Cleared _____	Denied _____
Date _____	

It is required of our insurance carrier to conduct background checks on all Employees and volunteers in supervisory positions. Information from the background check will be kept in secure files and not shared outside the organization.

I, the undersigned, consent to Crosswater Community Church to conduct a criminal background check.

I hereby authorize Crosswater Community Church to procure a background check, also known as a consumer report, which may include information regarding character, general reputation, or personal characteristics.

I understand that my birth date and social security number will be used only for purposes of conducting the background check. If the background search results in a record being found, I will be contacted.

I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification.

Printed Name (First, M.I., Last)*

Signature*

Date*

Social Security Number*

Date of Birth*

Address*

City, State, Zip*

Phone Number*

Email *

Ministry you will be serving with:* _____

(*REQUIRED)