

Background Check and Authorization

Area of Ministry you wish to serve:
Children's Ministry Student Ministry Other:
Today's Date:/
PRINT Full Name:
PRINT All Aliases:
Date of Birth:/ Place of Birth (City, State):
Social Security Number: Gender: M F
Current Address: (STUDENTS - Write your home/permanent address - NOT school address) Street:
City: State: Zip:
Previous Address: 1. Street:
2. Street:
City: State: Zip:
History: Have you ever been arrested, charged with a crime or served with papers? YES NO (if yes please explain)
I hereby request and release New Covenant Wesleyan Church from any liability associated with acquiring, viewing, or acting upon any information which pertains to any record of convictions contained in law enforcement files or in any criminal file maintained on me whether local, state or national.
I hereby release local, state and national law enforcement agencies from any and all liability resulting from such disclosure.
I hereby authorize New Covenant Wesleyan Church to speak at its discretion with anyone it deems appropriate in making a determination about the applicant's/volunteer's suitability and character.
I hereby state that all the provided information is true. I agree to abide by all instructions from New Covenant staff and affirm there are no reasons I am unsuitable to act as a volunteer.
I hereby authorize New Covenant Wesleyan Church to run a background check on me periodically.
Furthermore, I acknowledge that the disclosure of confidential information could be prejudicial to individuals and/or New Covenant Wesleyan Church and contrary to its interests. Accordingly, I will respect the confidentiality of such information and will agree not to discuss nor disclose it to any person and not make any use of such information for any purpose whatsoever. This undertaking on my part shall continue to have full effect notwithstanding the ending of my volunteer position with New Covenant Wesleyan Church.

Signature: _____ Date: _

Date: _____