

ASBURY UNITED METHODIST CHURCH

Permission to Obtain a Background Check

(Pack 351 Leader)

(This form authorizes the church to obtain background information and must be completed by the applicant. The church must keep this completed form on file for at least five years after requesting a background check.)

In the interest of safety and security I, the undersigned applicant (also known as “consumer”), authorize Asbury UMC through it’s independent contractor, LexisNexis, to produce background information (also known as a “consumer report and/or investigative consumer report”) about me, prior to, and at any time during, my service to the organization. This report may include my driving history, including any traffic citations; a social security number verification; present and former addresses; criminal and civil history/records; and the state sex offender records.

I understand that I am entitled to a complete copy of any background information report of which I am the subject upon my request to Asbury UMC, if such is made within a reasonable time from the date it was produced. I also understand that I may receive a written summary of my rights under the Fair Credit Reporting Act.

Signature of Applicant Date

Applicants Full Name (please print) Telephone #

Please print other names you have used (alias, maiden, nickname)

Identifying Information for Background Information Agency (also known as “Consumer Reporting Agency”)

_____-_____-_____
Social Security Number ____/____/____
Date of Birth _____
Driver License# / State Issued

Current Address City/State Zip Code County Length at Address

Former Address City/State Zip Code County Length at Address

Former Address City/State Zip Code County Length at Address

Former Address City/State Zip Code County Length at Address

Former Address City/State Zip Code County Length at Address

Former Address City/State Zip Code County Length at Address

NOTE: WE NEED ALL ADDRESSES FOR THE PAST SEVEN YEARS