

BACKGROUND CHECK FORM

The following questions are part of a process to help provide a safe and secure environment for OUR Kids. All information is confidential.

Have you ever been arrested, convicted of or pleaded guilty to any crime? _____

We conduct a police background check on all applicants. Do you have any objections? _____

If you answered "yes" to any of the above questions, please explain briefly. We at OUR Church understand the life-changing power of Jesus Christ and are eager to hear how He has helped you.

Criminal Records Check & Authorization (all applicants are required to complete this section.)

I hereby request a criminal background check and the release of any information, which pertains to any record of convictions in its files or in any criminal file maintained on me whether local, state, or federak. I

hereby release any criminal law enforcement agency form any and all liability resulting from such disclosure.

Any person or entity relying on this request may rely on a photocopy or facsimile as if it were original.

Signature (required) _____ **Date** _____

Social Security Number (required) _____ **Birth Date** _____

Legal Name (please print) _____ **Birth Place** _____

Address _____

City _____ **State** _____ **Zip** _____ **Driver's License #** _____

Phone Number _____ **Email** _____

Number of years at this Address _____

Previous Address _____

City _____ **State** _____ **Zip** _____

Marital Status _____ **Spouse's Name** _____

Applicant Statement (All applicants must sign this statement)

The information contained in this application is correct to the best of my knowledge. I give OUR Church the right to investigate all references and to secure additional information about me.

I here by release OUR Church and its representatives from liability for seeking such information and all other persons for furnishin such information. I have read the contents of this application and understand that this is a legally binding agreement.

Signature _____ **Date** _____