

Permission to Perform Background Check

Revised Aug2017

Only required if applying to serve children or teens

Thank you for volunteering to serve the children or teens at Crossroads Church. We want you to know that we take the same extreme measures to protect your confidential information as we do to protect those children and teens entrusted to our care. **Be mindful that you are writing your social security number on this form.**

Return completed form in sealed envelope to Information Center or email to info@crossroadsavon.com

This information is secure within the church office. Safe Hiring Solutions is the company who does background checks for Crossroads Church. As soon as the process is complete, your ministry leader will contact you to get you on the schedule to serve.

A criminal background check and/or a motor vehicle record check may be obtained in connection with your participation as a volunteer working with youth or children under the age of 18. This is not a financial credit check.

Before any adverse action is taken, based in whole or in part of the information contained in the report(s), you will be provided a copy of the report, the name, address and the telephone number of the reporting agency, a summary of your rights under the Fair Credit Reporting act, as well as additional information on your rights under the law.

AUTHORIZATION

By signing below I _____ hereby voluntarily authorize Crossroads Church of Avon, Inc to obtain a criminal background report and/or a motor vehicle record about me and to consider this information when making decisions regarding my participation with youth/children under the age of 18 at Crossroads Church Of Avon. I understand that I have rights under the Fair Credit Reporting Act, including rights discussed above. This report may be delivered in either written or electronic form.

Print Full Legal Name

Date

Other Names Used Within the Last 7 Years

Telephone number

Current Full Address (Ex: 777 Woodcrest Circle)

City, State, Zip Code

Address 2: (if you changed addresses in the past 5 years)

City, State, Zip Code

Social Security Number

Drivers License Number

Driver's License State

Signature (For ID Purposes Only)

Date of Birth (MM/DD/YYYY)

For office use only: Background check requested (date) _____

Result Received (date) _____

Applicant Cleared to Serve _____ (Administrator)