



Background Check Application

Confidential

Basic Information

Name _____
First MI Last

Address _____
Street Address City State Zip

Phone numbers _____
Home Work Cell Pager / beeper

Best times to reach me at home are _____ May we call you at work? Yes No

Email _____ Social Security # _____ Driver's License _____

Date of Birth: _____

Emergency contact _____ Phone _____
name and relationship

Family Information

Marital status (check one): Single Married (anniversary date _____) Divorced

If married, spouse's name _____

If you have children, their names and ages:

1. _____ 4. _____

2. _____ 5. _____

3. _____ 6. _____

Ministry Experience (list most recent first)

Church (name, city, state, and zip) Dates Area of service Contact person Phone

1. _____

2. _____

3. _____

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Waiver / Release

I, the undersigned, give my authorization to Faith Fellowship representatives—hereafter referred to as The Church—to verify the information on this form. The Church may contact my references and appropriate government agencies as deemed necessary in order to verify my suitability as a church volunteer staff children's ministry worker. I am willing to request and submit to The Church background reports on myself from the Texas Department of Social Services central registry.

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application to give you any information (including opinions) that they may have regarding my character and fitness for children's ministry. In consideration of the receipt and evaluation of this application by The Church, I hereby release any individual, church, children's organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature that may at any time result to me, my heirs, or family, because of compliance or any attempts to comply, with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

Should my application be accepted, I agree to be bound by the constitution, statement of faith and policies of The Church, and to refrain from conduct unbecoming to Christ in the performance of my services on behalf of The Church. If I violate these guidelines, I understand that my volunteer status may be terminated. By signing this application, I state that all of the information given about myself is true.

I further state that **I HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF, AND I SIGN THIS RELEASE AS MY OWN ACT.** This is a legally binding agreement which I have read and understand.

Print name

Signature

Witness

Date