Date of report: _____ Last Name, First name: _____

Permission to Obtain a Background Check

(This release form authorizes Mt Zion UMC to obtain background information and it 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 *Mount Zion United Methodist Church* through its independent contractor, First Advantage, to procure background information (also known as a "consumer report" or "investigative consumer report") about me, prior to and at any time during my service to Mt Zion UMC. This report may include my driving history, including any traffic citations; a social security number verification; present and former addresses; criminal and civil history and records; and 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 *Mount Zion United Methodist Church* 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: _____ Date: _____

Requested for (Sunday school, VBS, Youth Group, etc.)? _____

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

Print Name: _____
First Middle Last

Other Names Used (alias, maiden, nickname): _____

Current Address: _____
Street /P. O. Box City, State, Zip Code Dates

Previous Address: _____
Street /P. O. Box City, State, Zip Code Dates

Email: _____ Phone (Day):_____

Social Security Number: _____ Date of Birth (mm/dd/yr): _____ Gender: _____

Mt Zion Use Order # _____ Submitted by _____ Date _____

Updated Oct. 5, 2014 Approved (no issues): Yes No