



OLD FORT BAPTIST CHURCH
 10505 Dorchester Road
 Summerville, SC 29485
 (843) 873-2283

BACKGROUND CHECK FORM

Old Fort Baptist Church has a child/youth safety policy founded on respect and love for the children and youth of our church and community. This safety policy gives children, youth, parents, and staff a sense of confidence and peace. We ask your cooperation in completing and returning this application.

PERSONAL INFORMATION

Name _____ *(include first, middle, & last)*
 Current Address _____
 Previous Address _____
 Home Phone _____ Cell Phone _____ **email:** _____
 Social Security Number _____ Date of Birth (mm/dd/yyyy) _____
 Driver's License Number _____ State Issued _____

Are you currently under a charge or have you ever been arrested for, convicted of, or plead guilty to child abuse or a crime involving actual or attempted sexual misconduct or sexual molestation of a minor, or any other crime involving a minor? ____yes ____no; if yes, please explain

Are you currently under a charge or have you ever been arrested for, convicted or, or plead guilty to possession/sale of a controlled substance or of driving under the influence of alcohol? ____yes ____no; if yes, explain

Are you currently under a charge or have you ever been arrested for, convicted of, or plead guilty to a criminal act? ____yes ____no; if yes, please explain

APPLICANT'S STATEMENT & CRIMINAL RECORDS CHECK RELEASE

In connection with your employment or your willingness to volunteer with [Old Fort Baptist Church] (the "Company"), notice is hereby given that a consumer report and/or investigative consumer report may be obtained from a consumer reporting agency for employment purposes. These reports may contain information about your character, general reputation, personal characteristics and mode of living, whichever are applicable. They may involve personal interviews with sources such as your neighbors, friends or associates. The reports may also contain information about you relating to your criminal history, credit history, driving and/or motor vehicle records, education or employment history, or other background checks.

You have the right, upon written request made within a reasonable time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report prepared by contacting the Company and Protect My Ministry 14499 N. Dale Mabry Hwy., Suite 201 South, Tampa, FL 33618; Phone: 1-800-319-5581. For information about Protect My Ministry's privacy practices, see www.protectmyministry.com. The scope of this notice and below authorization is not limited to the present and, if you are hired, will continue throughout the course of your employment and allow the Company to conduct future screenings for retention, promotion or reassignment, as permitted by law and unless revoked by you in writing.

ACKNOWLEDGEMENT AND AUTHORIZATION

By signing below I hereby authorize the obtaining of consumer reports and/or investigative consumer reports by the Company at any time after receipt of this authorization and throughout the course of my employment, if applicable.

Signature: _____

Date: _____

Print Name: _____

Last Four Digits of SSN: _____