

## Permission to Obtain a Background Check

(This form authorizes the church/organization to obtain background information and must be completed by the applicant.)

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(Insert church na	through its ir	ndependent contractor, Ste	erling Infosyst	ems, to procu	ure backgro	ound informat	ion (also
		vestigative consumer repo	rt") about me	e, prior to, an	d at any tir	me during, my	service to
the organization.	This report may includ	e my driving history, includ	ding any traffi	c citations; a	social secu	urity number v	erification;
present and forme	er addresses; criminal a	and civil history/records; a	nd the state s	sex offender r	ecords.		
I understand that	t I am entitled to a cor	nplete copy of any backg	round informa	ation report o	of which I a	am the subjec	ct upon my
request to		, if such is made	within a reas	onable time f	rom the da	te it was prod	uced. I
also understand t	(Insert church name) hat I may receive a writ	ten summary of my rights	under the Fai	r Credit Repo	rting Act.		
Signature:			Da	to·			
oignature		-	Date:				
(Please keep the top p been ordered.)	portion of this form on file for	up to seven years. The bottom p	ortion may be sh	redded or given	back to the a	pplicant after the	e report has
	ldontifying l	nformation for Back	raround In	formation	Agonov	•	
		also known as "Consume			Agency		
	,			.g,			
Print Name:							
	First	Middle			Last		
Other Names Use		ame):					
Other Names Use		ame):					
	d (alias, maiden, nickn	ame):					
	d (alias, maiden, nickn	ame):	State	Zip Code			Dates
Current Address: <sub>-</sub>	d (alias, maiden, nickna Street /P. O. Box						Dates
Current Address: <sub>-</sub>	d (alias, maiden, nickna Street /P. O. Box				County		Dates
Current Address: <sub>-</sub> Former Address: <sub>-</sub>	d (alias, maiden, nickna Street / P. O. Box	City	State	Zip Code	County		
Current Address: _ Former Address: _ Social Security Nu	d (alias, maiden, nickna Street /P. O. Box Street /P. O. Box umber:	City	State State Home Telep	Zip Code Zip Code Ohone Numbe	County  County er:		Dates
Current Address: _ Former Address: _ Social Security Nu Driver's License N	d (alias, maiden, nicknown) Street /P. O. Box Street /P. O. Box umber:	City	State State Home Telep Dat	Zip Code Zip Code Ohone Numbe e of Birth:	County  County  er:	Gender_	Dates

California Applicants and Residents: If I am applying for employment in California or reside in California, I understand I have the right to visually inspect the files concerning me maintained by an investigative consumer reporting agency during normal business hours and upon reasonable notice. The inspection can be done in person, and, if I appear in person and furnish proper identification; I am entitled to a copy of the file for a fee not to exceed the actual costs of duplication. I am entitled to be accompanied by one person of my choosing, who shall furnish reasonable identification. The inspection can also be done via certified mail if I make a written request, with proper identification, for copies to be sent to a specified addressee. I can also request a summary of the information to be provided by telephone if I make a written request, with proper identification for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or directly charged to me. I further understand that the investigative consumer reporting agency shall provide trained personnel to explain to me any of the information furnished to me; I shall receive from the investigative consumer reporting agency a written explanation of any coded information contained in files maintained on me. "Proper identification" as used in this paragraph means information generally deemed sufficient to identify a person, including documents such as a valid driver's license, social security account number, military identification card and credit cards. I understand that I can access the following website - <a href="http://sterlinginfosystems.com/privacy">http://sterlinginfosystems.com/privacy</a> - to view STERLING'S privacy practices.