



BACKGROUND CHECK

Adult Volunteers

APPLICANT INFORMATION

Name: _____
Last First Middle

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Email: _____

Social Security #: _____ - _____ - _____ Date of Birth: ____/____/____

Valid Driver's License? ☐ Yes ☐ No Driver's License # (& State): _____

CRIMINAL HISTORY

Have you ever been convicted of a criminal offense? ☐ Yes ☐ No

Do you currently have any criminal actions pending in which you are the Defendant? (Not Applicable to California Applicants) ☐ Yes ☐ No

Are you currently on probation or parole? ☐ Yes ☐ No

If you answered "Yes" to any of the above questions, please explain the nature of the offense and provide the date of the offense and the county and state in which it occurred:

Have you ever been charged, convicted of, or pled guilty to a crime, either a misdemeanor or a felony (including but not limited to drug-related charges, child abuse, other crimes of violence, theft or motor vehicle violations)?

☐ Yes ☐ No

If yes, please explain:

Please complete information on back.

REFERENCES

List three references of people (non-family) who have known you for more than two years.

- 1) _____
Name Email Phone
- 2) _____
Name Email Phone
- 3) _____
Name Email Phone

APPLICANT STATEMENT

I authorize Faithbridge Church, Park Rapids, MN, the permission to obtain and/or request information about my criminal history from any entity chosen specifically for conducting this search, to release information regarding any record of charges or convictions contained in its files, or in any criminal file maintained on me, whether said file is a local, state, or national file, and including but not limited to accusations and convictions for crimes committed against minors, to the fullest extent permitted by city, county, state, and federal law. I do release said entities from all liability that may result from any such disclosure made in response to this request. I may revoke this request at any time, but that revocation must be in writing and give 30 days notice of same.

I certify that this volunteer application was completed by me and that all of the information on this application is true and correct to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of facts called for herein will result in my disqualification from further consideration as a volunteer. I understand that this background check is not valid without my signature.

Print Name

Signature

____ / ____ / ____
Date

Privacy Disclosure: Faithbridge Church promises to the applicant named above that the information provided in this document will be kept strictly confidential. Such information as birthdates and social security numbers are requested only for the purpose of providing proper identification in the screening process. No information will be sold or given to any individual or company. No information on this application will be shared with any members or attendees of Faithbridge Church, other than the reviewing pastor and clerical person who performs the checks.