Conway United Methodist Church

Background Screening Consent Volunteer

By my signature below, I hereby consent for Conway United Methodist Church to perform a criminal background check, Social Security verification, and nationwide sex offender registry search. I understand that any information provided will be used exclusively by Conway United Methodist Church for the purpose of considering my eligibility for volunteer ministry.

I certify that I have provided true, correct, and complete information below and in any interview related to my volunteer work. I agree to provide any additional information that may be requested.

I further certify that I am at least eighteen (18) years of age, have read and understand the foregoing statement, and am competent to execute this agreement.

| Name | | |
|-------------------------------------------|------------------------------------------|------|
| First | Middle | Last |
| Other Names Used (Maiden, Former) | | |
| Current Address (Include Street Number, A | spartment Number, City, State, Zip Code) | |
| Gender Date of Birth | | |
| Social Security Number | | |
| Driver's License Number | State | |
| | Signature | |
| | Oignature | |
| | Date | |
| | | |
| Background Screening Requested By: | | |
| | | |