

Background Screening Consent and Information Form
Applicant should complete all relevant information and sign and date the form.

Applicant's Full Name (Printed):

Maiden Name or Other Names Used:

Social Security Number: _____

Date of Birth_____/_____/_____

*NOTE: The above information is required for identification purposes only, and is in no manner used as qualifications for employment, internship, or service as a volunteer. The United Church of Christ Insurance Board and Christian Church (Disciples of Christ) in Tennessee abides by all applicable state and federal employment laws.

Present Address_____

City_____State_____Zip_____

Former Address_____

City_____State_____Zip_____

Please list all states and counties of residence since turning age 18

Please circle any of the following states in which you have lived: CA, CO, DE, LA, MA, SD, VT, WV, WY

I, _____, authorize Christian Church (Disciples of Christ) in TN and/or its agents to make an independent investigation of my background, references, character, past employment, education, credit history, adult criminal or police records, and motor vehicle records including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my Application and/or obtaining other information which may be material to my qualifications for service now and, if applicable, during the tenure of my service with Christian Church in TN/Bethany Hills Camp, Kingston Springs.

I release the United Church of Christ Insurance Board, and Christian Church in TN and its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or law suits in regards to the information obtained from any and all of the above referenced sources used.

The name above is my true & complete legal name. All information provided is true & correct to the best of my knowledge

Signature of Applicant

Date