



Boldly Following Jesus

**5609 Douglas Avenue
Des Moines, IA 50310**

Phone: 515.277.6369
Web: www.ucciaconf.org

Background Screening Consent and Information Form
Applicant must complete all information and sign and date form

Full Name: Last _____ First _____ Middle _____

Other names used including maiden names: _____

Social security number _____ Date of birth _____
(If a minor under 18, check here & parent **MUST SIGN** this form also)

Present Address: Street _____ City/State _____ Zip code _____

Daytime Phone _____ Evening Phone _____ Email _____

Include any other addresses for the past 10 years and how long at each address:

Former address _____

Former address _____

Former address _____

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

Reference: (Someone who knows you and has observed you working with young people.)

Name _____

Address _____ City/State _____ Zip code _____

Telephone _____ Email _____

I am a member of the following church: _____

I have been a member of this church since: _____

I have never been convicted of nor pled guilty or no contest to a crime. (Exclude convictions that have been sealed, expunged or legally eradicated, misdemeanor convictions for which probation was completed and the case was dismissed and minor traffic offenses) _____ True _____ Not True

If not true, on a separate sheet, please briefly describe the nature of the crime(s), the date and place of conviction and the legal disposition of the case.

I release the United Church of Christ Insurance Board and THE PRINCIPAL 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.

Are you applying for employment/service in California, Minnesota or Oklahoma? Yes___No___
If so, do you want a copy of any Consumer Report prepared concerning you? Yes___No___

I understand that California law requires the United Church of Christ Insurance Board and THE PRINCIPAL to give me a copy of any report requested within seven (7) days of the date the information was obtained and that failure to do so will expose the United Church of Christ Insurance Board and THE PRINCIPAL to liability (Section 1786.29).

(PRINT NAME) DATE

SIGNATURE _____ DATE _____

(PRINT NAME FOR APPLICANTS UNDER 18) DATE

SIGNATURE OF PARENT/GUARDIAN FOR APPLICANTS UNDER 18 DATE

For office use only:

- Criminal Background check performed on: _____
- Personal interview conducted by staff on: _____
- Reference and background inquiries completed on: _____
- "Safe Church" training completed on: _____