

## CONFIDENTIAL

Gethsemane United Methodist Church  
910 Addison Road South, Capital Heights, MD 20743, (301) 336-1219  
Background Check Authorization

Area of Ministry/ Service: \_\_\_\_\_

Print Name: \_\_\_\_\_  
(First) (Middle) (Last)

Former Name(s) Used: \_\_\_\_\_  
(Maiden) Year Married

Current Address Since: \_\_\_\_\_  
(Mo/Yr) (Street) (City) (Zip/State)

List all addresses you have lived at in the past seven years. If needed please list additional addresses on the back of this form:

Previous Address From: \_\_\_\_\_  
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: \_\_\_\_\_  
(Mo/Yr) (Street) (City) (Zip/State)

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Driver's License Number/State: \_\_\_\_\_

Are you a member of Gethsemane United Methodist Church? (Please circle) NO YES, Since: \_\_\_\_\_

The information contained in this application is correct to the best of my knowledge. I hereby authorize **Gethsemane United Methodist Church** and its designated agents and representatives to conduct a comprehensive review(s) of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report investigative consumer report may include, but is not limited to the following areas: verification of social security number; current and previous residences; employment history, character references; drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records. The information collected will be reviewed by **Gethsemane United Methodist Church**. **Gethsemane United Methodist Church** reserves the right to deny Volunteer status to any applicant for any reason.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me, to **Gethsemane United Methodist Church** or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources.

I hereby release **Gethsemane United Methodist Church**, the Social Security Administration, and its agents, officials, representative, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may, at any time, result to me, my heirs, family, or associates because of compliance with this authorization and request to release.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Previous Address From: \_\_\_\_\_  
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: \_\_\_\_\_  
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: \_\_\_\_\_  
(Mo/Yr) (Street) (City) (Zip/State)

**Dear Pastor/Confidentially Officer:**

A Gethsemane United Methodist Church Ministry is requesting the highlighted checks to be run on the prospective employee/volunteer.

- \_\_\_\_\_ Criminal History Search (county/local)
- \_\_\_\_\_ Criminal History Search (statewide)
- \_\_\_\_\_ Criminal History Search (nationwide)
- \_\_\_\_\_ Motor Vehicle Drivers Record (county/local)
- \_\_\_\_\_ Motor Vehicle Drivers Record (statewide)
- \_\_\_\_\_ Motor Vehicle Drivers Record (nationwide)
- \_\_\_\_\_ Social Security/Name Trace
- \_\_\_\_\_ Sex Offender Registry (county/local)
- \_\_\_\_\_ Sex Offender Registry (statewide)
- \_\_\_\_\_ Sex Offender Registry (nationwide)

After completing each highlighted search please check and initial that the search was completed. Please attach your findings from the searches requested to this page.

Thank You,

Safe Sanctuary Committee

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**FOR OFFICE USE ONLY:**

Date run \_\_\_\_\_ By \_\_\_\_\_

Date returned \_\_\_\_\_ Results reviewed by \_\_\_\_\_

**Additional Notes/Comments:**

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**Staff & Volunteer Packet**