

**COLLINS & WEST HARTLAND UNITED METHODIST CHURCH
AUTHORIZATION AND REQUEST FOR CRIMINAL RECORDS CHECK**

I, _____, hereby authorize _____ Church to request the background screening entity to release information regarding any record of convictions contained in its file, 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 or vulnerable adults, to the fullest extent permitted by state and federal law. I do release said church and background screening entity from all liability that may result from any such disclosure made in response to this request.

Signature of Applicant

Date

Print applicant's full name: _____

Print all other names that have been used by applicant (if any): _____

Date of birth: _____

Place of birth: _____

Social Security number (if required): _____

Driver's license number: _____ State issuing license: _____ License expiration date: _____

Request sent to (agency/law enforcement department):

Name: _____

Address: _____

Phone: _____