Disclosure and Authorization Form

As part of the application process for employment, both paid and non-paid positions at The Church of Jesus Christ, Headquarters in Monongahela, Pennsylvania, I understand that USA Backgrounds Incorporated will seek and obtain consumer reports / investigative reports about me as defined in the Fair Credit Reporting Act (FCRA). These investigative reports may include, but are not limited to federal criminal searches, statewide criminal searches, county criminal searches, sex offender search and employment verification.
I understand that these records may be used for the eligibility and qualification of my employment. I hereby authorize, without any reservation, the full release of these records and information for USA Backgrounds Incorporated and/or its agents to conduct the searches. I understand that my personal information below and the background check results will be considered **Strictly Confidential** by USA Backgrounds Incorporated and The Church of Jesus Christ.

If I am hired, I also authorize the full release of the information described above, without any reservation, throughout any duration of my employment at The Church of Jesus Christ. I also certify that all information provided below and on my resume is correct to the best of my knowledge. Any false statements provided in this form and my resume will be considered just cause for the termination of employment at any time. I agree that a copy or facsimile of this authorization shall be as valid as the original. In addition, I release and discharge USA Backgrounds Incorporated, and all of its agents, any expenses, losses, damages, and liabilities for the investigative process. Upon request, USA Backgrounds Incorporated will supply a copy of my reports and my rights under the Fair Credit Reporting Act. **Requests may be directed to: USA Backgrounds Incorporated, P.O. Box 64921, Virginia Beach, VA 23467-4921 or contacting us at 757.471.4677.**

FULL NAME: _____
FIRST LAST MIDDLE

NAMES USED IN THE PAST 7 YEARS: _____/_____/_____

LAST 4 OF SOCIAL SECURITY # _____ D.O.B. _____/_____/_____
MO. DAY YR

CURRENT ADDRESS _____

_____

PREVIOUS ADDRESS _____

_____

List all of the cities (to include the state) you have lived in the past 7 years:

_____ / _____ / _____

_____ / _____ / _____

HOME PHONE # ( ) CELL ( ) E-MAIL _____

BRANCH / MISSION OTHER _____

_____
Print Name **Signature** **Date**

FOR OFFICE USE ONLY
TYPES OF HISTORIES (CHECK ALL THAT ARE TO BE ORDERED): FAX TO: 757.222.8400

Criminal _____ **State(s)** _____ **Federal Criminal** _____ **Sex Offender** _____

Employment verification search _____

Authorized by _____ **Date** _____