Permission to Obtain a Background Check

(This form authorizes the church to obtain background information and must be completed by the applicant. The church must keep this completed form on file for at least five years after requesting a background check.)

I, the undersigned applicant (also known as "consumer"), authorize Ballston Spa United Methodist Church to procure background information (also known as a "consumer report and/or investigative consumer report") about me thru a UMC District recommended independent contractor. This report may include my driving history, including any traffic citations; a social security number verification; present and former addresses; employment history, criminal and civil history/records; and the state sex offender records.

I understand that	I am entitled to	a complete copy	of any background	information report of	which I am the subje	ct upon my request
to Ballston Spa l	Inited Methodis	t Church, if such	is made within a re	easonable time from t	the date it was produ	ced.
I have read and/ Law.	or received a c	opy of my rights	in regards to the F	air Credit Reporting A	ct and Article 23-A of	the NY Correction
Signature:				_ Date:		
Identifyii	ng Informat	ion for Back	ground Inform Reporting A	• • • • • • • • • • • • • • • • • • • •	llso known as "(Consumer

Print Name:	First		iddle		Last		
Other Names Use	d (alias, maiden, nicknan						
Current Address: _	Street /P. O. Box	City	State	Zip Code	County	Dates	
Former Address: _		·	State				
	Street /P. O. Box	City	State	Zip Code	County	Dates	
Social Security Nu	ımber:		Daytime Te	Daytime Telephone Number:			
	lumber:		ance: Cla	ss of License			
	Gender		duan lika a aanu	ilil V	П N- П		
Emaii Address:		woul	u you like a copy (emaneu? Yes			