

# Criminal Records Check Authorization Form

I hereby give my permission for AGAPE Preschool at Gayton Baptist Church to obtain information relating to my criminal history record. The criminal history record, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudications. I understand that this information will be used, in part, to determine my eligibility for an employment or volunteer position with AGAPE Preschool.

I also understand that as long as I remain an employee or volunteer here, the criminal history records check may be repeated at any time. I understand that I will have the opportunity to review the criminal history and a procedure is available for clarification, if I dispute the record as received. I also understand that, by law, I may request a copy of the document.

I, the undersigned, do for myself, my heirs, executors and administrators, hereby remise, release and forever discharge and agree to indemnify Gayton Baptist Church and each of their officers, directors, employees, and agents harmless from and against any and all causes of actions, suits, liabilities, costs, debts, and sums of money, claims, demands, whatsoever, and any and all related attorney's fees, court costs, and other expenses resulting from the investigation of my background in connection with my application to become an employee or volunteer of AGAPE Preschool.

\_\_\_\_\_ Please initial here if you would like to grant permission to AGAPE Preschool to perform a background check for the next 5 years without having to complete this form each year. The check will only be done if you are asked to participate in a project with AGAPE Preschool or Gayton Baptist Church.

Print Name \_\_\_\_\_

Date \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

Print Witness Name \_\_\_\_\_

Witness's Signature \_\_\_\_\_

PLEASE COMPLETE ALL INFORMATION ON THE REVERSE SIDE.

Full Name \_\_\_\_\_  
Last First Middle Maiden

Physical Address \_\_\_\_\_  
Street City State Zip

How long have you been at this address? \_\_\_\_\_

If less than one year, please provide previous address: \_\_\_\_\_

Sex (*please indicate*): Male \_\_\_ Female \_\_\_

Date of Birth: \_\_\_ / \_\_\_ / \_\_\_  
Month Day Year

Social Security Number: \_\_\_ - \_\_\_ - \_\_\_

Driver's License Number (if driving a church vehicle) \_\_\_\_\_

Have you ever been convicted of a crime? Yes \_\_\_ No \_\_\_

Are there any legal charges pending against you? Yes \_\_\_ No \_\_\_

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

The signature represents my current legal name and any previously used names are listed below:

Additional Names: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date