## Permission to Obtain a Background Check

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

I, the undersigned applicant (also known as "consumer"), authorize **Calvary Nexus** to procure background information (also known as a "consumer report and/or investigative consumer report") about me. This report may include my driving history, including any traffic citations; a social security number verification; present and former addresses; 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 subject upon my request to **Calvary Nexus** if such is made within a reasonable time from the date it was produced. I also

understand that I may receive a written summary of my rights under the Fair Credit Reporting Act.

Signature:	Date:			
Email:			Phone:	
	ormation for Backgr own as "Consumer l			
Print Name:First	Middle		Last	
Other Names Used (alias, maiden, nickna				
Current Address:				
Street /P. O. Box	City	State	Zip Code County	Dates
Former Address: Street /P. O. Box	City	State	Zip Code County	Dates
Social Security Number:	Daytime Telephone Number:			
Driver's License Number:	State of Issuance	::	Date of Birth:	Gender
	YOUR Ministry Inf	ormati	on	

Campus you prefer to serve at: \_\_\_\_\_\_ Service time your prefer to serve during: \_\_\_\_\_

Age or grade your prefer to serve: \_\_\_\_\_