

# ASBURY UNITED METHODIST CHURCH

## 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.)

In the interest of safety and security I, the undersigned applicant (also known as “consumer”), authorize Asbury UMC through its independent contractor, LexisNexis, to produce background information (also known as a “consumer report and/or investigative consumer report”) about me, prior to, and at any time during, my service to the organization. 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 Asbury UMC, 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.

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Signature of Applicant Date

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Applicants Full Name (please print) Telephone #

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Please print other names you have used (alias, maiden, nickname)

### Identifying Information for Background Information Agency (also known as “Consumer Reporting Agency”)

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\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_
\_\_\_\_\_  
 Social Security Number Date of Birth Driver License# / State Issued

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Current Address	City/State	Zip Code	County	Length at Address
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Former Address	City/State	Zip Code	County	Length at Address
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Former Address	City/State	Zip Code	County	Length at Address
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**NOTE: WE NEED ALL ADDRESSES FOR THE PAST SEVEN YEARS**