

Background Check

First Christian Church Volunteers

This form is to be completed by all those desiring to serve in any ministry at First Christian Church. It is being used to help First Christian Church provide a safe and secure environment for those who participate in our programs and use our facilities.

Today's Date: _____

Name: _____
First *Mi* *Last*

Social Security Number: _____ - _____ - _____

Date of Birth: _____

Address: _____

City/State/Zip: _____

Phone Number: _____

If at the above address less than 5 years, give previous address and number of years there: _____ yrs.

Address: _____

City/State/Zip: _____

I authorize and understand that in order to volunteer at First Christian Church I must have First Christian Church perform a criminal records check for arrest, convictions, or other information the local, state or federal criminal enforcement agency may have regarding me and release such information to the following:

First Christian Church
6900 Market Avenue N.
Canton, OH 44721
(330) 456-2600

I release First Christian Church and above mentioned agencies from any liability or damages resulting from the release of this information. I waive any present or future claims of privacy resulting of this information for qualifications of volunteer work with First Christian Church.

Signature: _____ Date: _____

For Staff Use Only: _____

Early Childhood/Elementary
 Group Life

Student Ministry
 MOPs

Transportation

