West U Methodist Church

CONSENT TO PERFORM CRIMINAL HISTORY/BACKGROUND CHECK IN COMPLIANCE WITH THE FCRA (FAIR CREDIT REPORTING ACT)

Last Name	First Name		Full Middle Name
Maiden or other name(s) used in any and a	all other records of birt	th or records of resider	nce.
Address	Ap	artment or #	
	1		
City	County Sta	te	Zip
City	County Sta		Zip
	-		
**Date of Birth Place of Birth		**Gender	Race
	~		
Type of Photo ID	Social	Security Number:	
Drivers License Number	State	Phone H	Mohile
		1	
E-mail			
Emergency Contact	Phon	e	
**TO BE USED FOR CRIMINAL HIS	STORY CHECKS O	DNLY	
References –Name		Phone	Number
1			
2			
2			
3			
Ι,	. a:	m an applicant for e	employment / volunteer work
with	church/division	and have been ad	employment / volunteer work vised that as a part of the
application process, the church/divisio			
to the church/division use of any inf criminal history check. The church/div			
negative information that would adve			
addition, I have been informed that I w			
reported within a reasonable time fram	ne established within	n the sole discretion	of the church/division. Under
the fair Credit Reporting Act, I have be	een advised that upo	on request I will be p	rovided the name, address and

telephone number of the reporting agency as well as the nature, substance and source of all information.

The following are my r	esponses to questions about	t my criminal history (if any).
1YES NO	Have you ever been convi	cted or plead guilty before a court for any federal, state or municipal
	ude minor traffic misdemea	anors).
If yes, please provide d	etails below.	
State:	County:	Date of Offense: / /
Details of conviction:		
2YES NO	Have you ever received	deferred adjudication or similar disposition for any federal, state or
municipal offense? If yes, please provide d	etails below.	
State:	County:	Date of Offense:
Details of offense:		
	Have you ever received If yes, please provide detail	probation or community supervision for any federal, state or ils below.
State:	County:	Date of Offense:
Details of supervision:		
	Have you ever been hited States? If yes, pleas	convicted of any criminal offense in a country outside the se provide details below.
Country:	City:	Date of Offense:
Details of conviction:		
5YESNO If yes, please provide d		onsent form, do you have any pending charges against you?
State:	County:	Date of Arrest
Details of pending char		
Details of pending char		

THIS SECTION IS TO BE USED TO LIST ALL COUNTIES AND STATES OF RESIDENCE SINCE HIGH SCHOOL GRADUATION OR AGE 18. CITY/TOWN COUNTY STATE **COUNTRY** I HEREBY CERTIFY THAT ALL INFORMATION PROVIDED IN THIS CONSENT FORM IS TRUE, CORRECT AND COMPLETE. "ALL OFFERS OF EMPLOYMENT/ VOLUNTEER ARE CONTINGENT UPON APPLICANT'S SUCESSFUL COMPLETION, AS DETERMINED IN EMPLOYER'S SOLE DISCRETION, OF THIS CRIMINAL HISTORY/BACKGROUND CHECK." I have completed this three page consent form, and I hereby give West U Methodist my consent to perform a criminal history/background check to protect the children and youth of the West U Methodist. I have attached a photo copy of my driver's license or photo ID. I hereby acknowledge that I have read and that I understand the West U Methodist Safe Sanctuary Policy. I hereby agree to follow church policies and procedures in accordance with Safe Sanctuary regulations. Applicant Signature Thank you for volunteering to provide a safe environment for the children and youth of West U Methodist, and for taking the time to read the Safe Sanctuary policy and complete this long form! If you have questions, do not hesitate to contact:

Senior Pastor Dr. Linda Christians at lchristians@westumethodist.org or Director of Finance & Operations Beck Brownlie at rbrownlie@westumethodist.org.

Please complete, sign and return this entire three page form to the church: Attention: Beck Brownlie West University United Methodist Church 3611 University, Houston, TX 77005 Phone 713.664.8111 Fax 713.666.9088 www.westumethodist.org