

**AUTHORIZATION AND REQUEST FOR A CRIMINAL RECORDS CHECK**

*First United Methodist Church Bentonville, 201 NW Second Street, Bentonville, Arkansas 72712*

I am an applicant for serving as a volunteer/paid staff with children, youth and/or vulnerable adults at First United Methodist Church Bentonville. As a part of the application process I have been advised that the church conducts a criminal history check including but not limited to accusations and convictions for crimes committed against minors, to the fullest extent permitted by state and federal law. I do hereby consent to the use of any and all information provided to the church in the application process to be used in the criminal history/background check. I hereby certify that all information provided in this consent form is true, correct and complete. If any information proves to be incorrect or incomplete, I understand that can lead to my immediate termination as a paid employee or volunteer. I release First United Methodist Church Bentonville and the reporting agent from all liability that may result from any such disclosure made in response to this request. First United Methodist Church Bentonville has my permission to perform a background check as part of the Safe Sanctuaries recertification process as needed.

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

Print applicant's full name: \_\_\_\_\_

Print all other names used by applicant (if any) \_\_\_\_\_

Date of Birth \_\_\_\_\_

Place of Birth \_\_\_\_\_

Social Security Number \_\_\_\_\_

Driver's License Number \_\_\_\_\_ State Issuing License: \_\_\_\_\_

License Expiration Date: \_\_\_\_\_

Current Local Address: \_\_\_\_\_

\_\_\_\_\_  
(City) (State) (Telephone Number)

Is there anything in your background you would like to disclose/explain? \_\_\_\_\_

\_\_\_\_\_

*Person Making Request* \_\_\_\_\_

*Title/Position* \_\_\_\_\_

**Attached ALL hard copy reports to this form**