

# Background Check Release Form

Name \_\_\_\_\_ Date \_\_\_\_\_

## PLEASE READ AND UNDERSTAND THIS STATEMENT BEFORE SIGNING YOUR APPLICATION

The information I have provided is true, correct and complete. False, incomplete or misrepresented information of any kind, will be sufficient cause for my application to be rejected.

I authorize representatives of First Baptist Church to contact and obtain information about me from references I provided, and any other party necessary to verify the accuracy of information I disclosed in this application. To assist in the processing of my Application, I waive all rights and claims I may otherwise have against First Baptist Church and its representatives, for seeking, and using information to evaluate my request and all other persons, corporations or organizations who provide information for this purpose.

I hereby, authorize representatives of First Baptist Church of Cleveland or their agent, to conduct a background check for the purpose of participation in a mission trip to \_\_\_\_\_. I understand this will include obtaining information and /or copies of civil, criminal and driving records. I authorize the release of such.

\_\_\_\_\_  
Signed

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

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