

## Candidate Authorization Form Background Investigation Consent

I, \_\_\_\_\_, hereby authorize ***Memorial Baptist Church*** and/or its agents to make an independent investigation of my background, references, character, past employment, education, credit history, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my application and/or obtaining other information which may be material to my qualifications for employment now and, if applicable, during the tenure of my employment with Memorial Baptist Church.

I release Memorial Baptist Church and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or lawsuits in regard to the information obtained from any and all of the above referenced sources used.

The following is my true and complete legal name, and all information is true and correct to the best of my knowledge:

Full Name: \_\_\_\_\_

*(Print — include middle name)*

Maiden Name or Other Names Used: \_\_\_\_\_

Present Address: \_\_\_\_\_

How Long at Present Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Former Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: (Day) \_\_\_\_\_ (Month) \_\_\_\_\_ (Year) \_\_\_\_\_

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

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

State of License: \_\_\_\_\_

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Date

\*NOTE: The above information is required for identification purposes only, and is in no manner used as qualifications for employment. Memorial Baptist Church abides by all applicable state and federal employment laws.

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Date Submitted for Background Check: \_\_\_\_\_ Order #: \_\_\_\_\_