

DISCLOSURE and AUTHORIZATION – BACKGROUND INVESTIGATION

In connection with my application to serve as a volunteer in Children's Ministries at **Bethany Baptist Church** ("Client"), I understand that a criminal background check will be requested by Client for volunteer purposes from Protect My Ministry, Inc., ("Protect My Ministry"). The scope of this background check will include a search of the following:

- National Criminal Database
- National Sex Offender Registry
- Home State and County criminal records
- Social Security Number verification
- Address history

The results of this check may be obtained at any time after receipt of this Disclosure and Authorization and, if I serve as a volunteer, throughout the course of my volunteer service, as permitted by law and unless revoked by me in writing. I understand that I have the right, upon written request made within a reasonable amount time after the receipt of this notice, to request disclosure of the nature and scope of any investigative report to Protect My Ministry, Inc., 14499 N. Dale Mabry Hwy., Suite 201 South, Tampa, FL 33618 or 1-800-319-5581. For information about Protect My Ministry's privacy practices, see www.protectmyministry.com.

Acknowledgement and Authorization

By signing below, I voluntarily and knowingly authorize Client or its authorized agents to obtain or prepare consumer reports or investigative consumer reports about me. I certify that I have read this Disclosure and Authorization under the Fair Credit Reporting Act.

Signature

TODAY'S DATE _____

LAST NAME _____ FIRST NAME _____ MIDDLE NAME/INITIAL _____

HOME ADDRESS _____

CITY _____ COUNTY _____ STATE _____ ZIP _____

SSN

Driver's License or STATE ID

STATE ISSUED

EMAIL ADDRESS (Required)

PHONE

For identification purposes only, please provide FULL DATE OF BIRTH: _____

Please List Other Names Used _____