

ROSE HILL UNITED METHODIST CHURCH  
Volunteer Application/Background Screening  
Information

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

Maiden Name or other name(s) used in any and all other records of birth or records of residence \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

County: \_\_\_\_\_ State/Zip: \_\_\_\_\_

How Long at this address: \_\_\_\_\_ (If less than 10 years, please list previous addresses, including county of residence:

\_\_\_\_\_  
\_\_\_\_\_

Home Telephone No: \_\_\_\_\_ Alternate Telephone No. \_\_\_\_\_

Driver's License No.: \_\_\_\_\_ State: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

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

Personal References

Name	Telephone No.	How Long Knowing ?
------	---------------	--------------------

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

During the past ten (10) years, have you ever been convicted of, plead guilty to, or received probation, deferred adjudication, or any other type of alternative method of supervision or correction for a misdemeanor, having penalty of imprisonment or a fine of more than \$500, or a felony? (Answering Yes is not an automatic bar to consideration for employment or to serve as a volunteer worker, but will be considered in relation to specific requirements and/or duties. \_\_\_\_

If yes, please explain. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Have you been convicted of a crime (exclude minor traffic cases; but include DUIs)? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Are criminal charges now pending against you? \_\_\_\_\_ If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

---

---

I, \_\_\_\_\_, am an applicant for volunteer work with Rose Hill United Methodist Church and understand that as a part of the application process, the church conducts a criminal history background check. The church has informed me that I have the right to review and challenge any negative information that would adversely impact a decision to offer volunteer work. In addition, I have been informed that I will have a reasonable opportunity to clear up any mistaken information reported within a reasonable time frame established within the sole discretion of the church. Under the Fair Credit Reporting Act, I have been advised that upon request, I will be provided the name, address and telephone number of the reporting agency as well as the nature, substance and source of all information. Rose Hill United Methodist Church will verify all references given.

**READ CAREFULLY:**

I hereby authorize Rose Hill United Methodist Church to request any information regarding any record of indictment, charges, or convictions contained in any file maintained on me, whether said file is a local, county, state, or national file, and including, but not limited to, accusations charges, indictments, and convictions for crimes or traffic convictions, to the fullest extent permitted by state and federal law. In connection herewith, I hereby authorize any agency (including law enforcement agencies) to release such information. I hereby **RELEASE AND HOLD HARMLESS** Rose Hill United Methodist Church, and all of the herein referenced agencies which provide the contents of said files from all liability that may result from any said request and/or disclosure made in response to such request. **I ALSO AUTHORIZE AN ANNUAL BACKGROUND SCREENING BE COMPLETED.**

This authorization is given as part of my application for volunteer work at the church. All information relative to the background investigation is confidential and any dissemination will be in accordance with state and federal law.

I certify that I have read and understand the foregoing language that information developed as a result of my authorizing this investigation shall only be shared with the Rose Hill UMC Safe Sanctuary Coordinator. I certify that the information on this form contains no willful misrepresentation and that the information given is true and complete to the best of my knowledge. I understand that the Church may contact others and at any time, seek proof of any information contained in this application.

\_\_\_\_\_

Signature of Applicant

\_\_\_\_\_

Date

**COPY FOR YOUR RECORDS**

**ROSE HILL UNITED METHODIST CHURCH**

**DISCLOSURE OF INTENT TO OBTAIN CONSUMER REPORTS**

**OR INVESTIGATIVE CONSUMER REPORTS**

I, \_\_\_\_\_, am an applicant for volunteer work with Rose Hill United Methodist Church and understand that as a part of the application process, the church conducts a criminal history background check. The church has informed me that I have the right to review and challenge any negative information that would adversely impact a decision to offer volunteer work. In addition, I have been informed that I will have a reasonable opportunity to clear up any mistaken information reported within a reasonable time frame established within the sole discretion of the church. Under the Fair Credit Reporting Act, I have been advised that upon request, I will be provided the name, address and telephone number of the reporting agency as well as the nature, substance and source of all information. Rose Hill United Methodist Church will verify all references given.

**READ CAREFULLY:**

I hereby authorize Rose Hill United Methodist Church to request any information regarding any record of indictment, charges, or convictions contained in any file maintained on me, whether said file is a local, county, state, or national file, and including, but not limited to, accusations charges, indictments, and convictions for crimes or traffic convictions, to the fullest extent permitted by state and federal law. In connection herewith, I hereby authorize any agency (including law enforcement agencies) to release such information. I hereby **RELEASE AND HOLD HARMLESS** Rose Hill United Methodist Church, and all of the herein referenced agencies which provide the contents of said files from all liability that may result from any said request and/or disclosure made in response to such request. **I ALSO AUTHORIZE AN ANNUAL BACKGROUND SCREENING BE COMPLETED.**

This authorization is given as part of my application for volunteer work at the church. All information relative to the background investigation is confidential and any dissemination will be in accordance with state and federal law.

I certify that I have read and understand the foregoing language that information developed as a result of my authorizing this investigation shall only be shared with the Rose Hill UMC Safe Sanctuary Coordinator. I certify that the information on this form contains no willful misrepresentation and that the information given is true and complete to the best of my knowledge. I understand that the Church may contact others and at any time, seek proof of any information contained in this application.

---

Signature of Applicant

---

Date