Notification and Authorization to Conduct Background Investigation

I hereby authorize **CORNERSTONE FELLOWSHIP MILILANI MAUKA CHURCH** or its agent, BACKGROUNDCHECKS.COM, to investigate my background to determine any and all information of concern to my record, whether same is of record or not, and I release employers and persons named in my application from all liability for any damages resulting from his/her furnishing said information.

Additionally, I hereby authorize any investigation of my personal history, including, but not limited to a credit history, driving history, educational background, military record, criminal records and I also authorize previous employers, and any references provided by me or ascertained by investigation, to release information about my performance, integrity, general character, and any other job specific information requested. I authorize the release of this information by the appropriate agencies to the investigating service. I understand this may include a workers compensation claims search after a conditional job offer has been made. I also understand I may be required to take a drug test before or during employment.

This authorization, in original or copy form, shall be valid for this and for any future reports and updates that may be requested.

PLEASE PRINT CLEARLY **USE BLACK OR BLUE INK ONLY**

Name: First: _____ MI: ____ Last: _____ **DOB**: ____/_____/_____

SSN: _____ - _____ - _____ Other Names or SSN Used: _____

Gender: Male ____ Female ____ Ethnicity: _____

Current Street Address: _____ Apt.:_____

City: _____ State: _____ Zip: _____

Phone: (_____) _____

Driver's License#: _____ State: _____

LIST ALL PREVIOUS ADDRESSES FOR THE PAST 7 YEARS: (☐check here if more on reverse side)

_____ DATES: _____ - _____
Street Address City State Zip from to

_____ DATES: _____ - _____
Street Address City State Zip from to

MAY WE CONTACT YOUR CURRENT EMPLOYER? ☐**YES** ☐**NO**

HAVE YOU EVER BEEN CONVICTED OF A CRIME? ☐**YES** ☐**NO**

This includes but is not limited to pleas of guilty, nollo contendere, no contest, adjudication withheld, and pre-trial intervention programs. If YES show details including date, charge, county, disposition on reverse.

Signature: _____ **DATE**: ____/_____/_____

For CORNERSTONE FELLOWSHIP MILILANI MAUKA Office Use ONLY

Client Ref: _____ **Date Requested: _____**

Please carry out the services indicated below:

	Extensive Employee Screening		Extensive Volunteer Screening
	Basic Employee Screening		Basic Volunteer Screening

Results of Background Check_____ Date_____
Results of Background Check_____ Date_____
Results of Background Check_____ Date_____
Results of Background Check_____ Date_____

Revised 3/15/13