

GREENSBURG UNITED METHODIST CHURCH

APPLICATION TO WORK/VOLUNTEER
WITH CHILDREN AND/OR YOUTH

All three pages of this application are to be completed by all persons (volunteer or compensated) who desire to work with children or youth in our church's ministries. This application form is being used to help the church provide a safe and secure environment for those children and youth who participate in our programs and for those who work with them.

PERSONAL

Date _____

Name _____
Last First Middle

Former Name (if applicable) _____

Present Address _____

City _____ State _____ Zip _____

Home phone () _____ Other phone numbers () _____

How long have you lived at the above address? _____

If less than one year, provide all previous addresses for the past five years:

Please indicate the type of youth or children's work you prefer. _____

Why do you want to serve in this position? _____

Please indicate the date you would be available to begin. _____

REFERENCES

Please list three persons who have known you for at least three years and who are familiar with your character, particularly as it relates to supervision of children and youth. **None of the references may be a relative.**

1. Name _____
Address _____
Daytime phone () _____ Evening phone () _____
Length of time you have known reference _____
Relationship to reference _____
2. Name _____
Address _____
Daytime phone () _____ Evening phone () _____
Length of time you have known reference _____
Relationship to reference _____
3. Name _____
Address _____
Daytime phone () _____ Evening phone () _____
Length of time you have known reference _____
Relationship to reference _____

APPLICANT'S AUTHORIZATION AND RELEASE

The information contained in this application is correct and complete to the best of my knowledge. I authorize any references or churches listed in this application to give you any information (including opinions) that they may have regarding my character and fitness for work with children or youth. In consideration of the receipt and evaluation of this application by Greensburg United Methodist Church, I hereby release any individual, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family on account of compliance or any attempts to comply, with this authorization. Should my application be accepted, I agree to abide by the Greensburg United Methodist Church Child Protection Policy and Procedures and will live by the understanding that, as a person of authority, it is my responsibility to avoid inappropriate behavior with any children or youth in my care.

I further state that I **HAVE CAREFULLY READ THE FOREGOING AUTHORIZATION AND RELEASE, AND KNOW THE CONTENTS THEREOF AND I SIGN IT AS MY OWN FREE ACT.** This is a legally binding agreement which I have read and understand.

Applicant's signature _____
Date _____

How to use this consent form:

1. Enter their *full legal* name. IE: Susan instead of Sue.
2. List any other names as Alias or Maiden names.
3. Please include middle initial or full middle name for identification purposes if you have a common name.
4. Social Security Numbers are used *only for address history and alias name information*. It will **not** affect your credit score nor will it give Greensburg United Methodist Church you credit report information.
5. Volunteer MUST sign and date ***both pages*** of this document.
6. This signed document will be stored in a secure location. It is Greensburg United Methodist Church's legal proof you gave permission to conduct a background screening.

The following is information required in order for **Greensburg United Methodist** to obtain a complete consumer report:

FULL LEGAL NAME (First, Full Middle Name, Last Name)	
SOCIAL SECURITY NUMBER*	DATE OF BIRTH*
STREET ADDRESS	
CITY, STATE, ZIP CODE	
DRIVER'S LICENSE NUMBER	ISSUING STATE
OTHER OR FORMER NAMES (AKA, Maiden Names, Married Names, Surnames, Etc.)	
CONSUMER'S SIGNATURE	DATE

* This information will be used for background screening purposes only.

Please list all Counties and States you have lived in since the age of 18.

County	City	State	Name Used in County	Date From	Date To
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DISCLOSURE AND AUTHORIZATION FOR VOLUNTEERS
[IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION]
DISCLOSURE REGARDING BACKGROUND INVESTIGATION

DISCLOSURE

In connection with your application to volunteer with **Greensburg United Methodist Church**, which may be deemed "employment purposes" under the Fair Credit Reporting Act, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends or associates. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records ("driving records"), verification of your education or employment history, military records, professional licensure records, drug testing, or other background checks. Credit history will only be requested where such information is substantially related to the duties and responsibilities of the position for which you are applying. These reports may contain information concerning the reasons for termination of past employment. You have the right, upon written request made within a reasonable time, to request whether a consumer report has been run about you, and disclosure of the nature and scope of any investigative consumer report and to request a copy of your report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for volunteer services is an investigation into your education and/or employment history conducted by **SecureSearch, Consumer Disputes, 558 Castle Pines Pkwy., #B4-137, Castle Rock, CO 80108, (866) 891 – 1954, www.securesearchpro.com**, or another outside organization. The scope of this notice and authorization is all encompassing, however, allowing the Company to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and throughout the course of your volunteer service to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

MAINE AND NEW YORK APPLICANTS OR VOLUNTEERS ONLY: *You have the right to inspect and receive a copy of your investigate consumer report requested by [COMPANY NAME] by contacting the consumer reporting agency identified directly above directly. You may also contact the Company to request the name, address, and telephone number of the nearest unit of the consumer reporting agency designated to handle inquiries, which the Company shall provide within 5 days.*

NEW YORK APPLICANTS OR VOLUNTEERS ONLY: *Upon request, you will be informed whether or not a consumer report was requested by [COMPANY NAME], and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. By signing below, you also acknowledge receipt of Article 23-A of the New York Correction Law.*

OREGON APPLICANTS OR VOLUNTEERS ONLY: *Information describing your rights under federal and Oregon law regarding consumer identity theft protection, the storage and disposal of your credit information, and remedies available should you suspect or find that the Company has not maintained secured records is available to you upon request.*

WASHINGTON STATE APPLICANTS OR VOLUNTEERS ONLY: *You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.*

ACKNOWLEDGMENT AND AUTHORIZATION

AUTHORIZATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION AND A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize, without reservation, the obtaining of "consumer reports" or "investigative consumer" reports by Greensburg United Methodist Church at any time after receipt of this authorization and throughout my volunteer service, if applicable. I further authorize and request, without reservation, any present or former employer, school or university (public or private), any law enforcement agency, administrator, state or federal agency, institution, division of motor vehicles, information service bureau, insurance company, consumer reporting agencies, or other persons or agencies to furnish any and all background information requested by **SecureSearch, Consumer Disputes, 558 Castle Pines Pkwy., #B4-137, Castle Rock, CO 80108, (866) 891-1954, www.securesearchpro.com**, another outside organization acting on behalf of the Company, and/or the Company itself. I also agree that a fax, electronic or photocopy of this Authorization with my signature shall be as valid as the original.

NEW YORK APPLICANTS OR VOLUNTEERS ONLY: By signing below, you also acknowledge receipt of Article 23-A of the New York Correction Law.

MINNESOTA AND OKLAHOMA APPLICANTS OR VOLUNTEERS ONLY: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company. ☐

CALIFORNIA APPLICANTS OR VOLUNTEERS ONLY: By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law. ☐

NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW

Greensburg United Methodist Church (the "Company") intends to obtain information about you for "employment purposes" from an investigative consumer reporting agency or consumer credit reporting agency. Thus, you can expect to be the subject of "investigative consumer reports" and "consumer credit reports" obtained for "employment purposes." Such reports may include information about your character, general reputation, personal characteristics and mode of living. With respect to any investigative consumer report from an investigative consumer reporting agency ("ICRA"), the Company may investigate the information contained in your application and other background information about you, including but not limited to obtaining a criminal record report, verifying references, work history, your social security number, your educational achievements, licensure, and certifications, your driving record, and other information about you, and interviewing people who are knowledgeable about you. The results of this report may be used as a factor in making decisions for "employment purposes." The source of any investigative consumer report (as that term is defined under California law) will be SecureSearch, Consumer Disputes, 558 Castle Pines Pkwy., #B4-137, Castle Rock, CO 80108, (866) 891 – 1954, www.securesearchpro.com.

The source of any credit report will be SecureSearch or ClearStar Logistics, Consumer Disputes, 558 Castle Pines Pkwy., #B4-137, Castle Rock, CO 80108, (866) 891 – 1954, www.securesearchpro.com.

The Company agrees to provide you with a copy of an investigative consumer report when required to do so under California law. Under California Civil Code section 1786.22, you are entitled to find out from an ICRA what is in the ICRA's file on you with proper identification, as follows: In person, by visual inspection of your file during normal business hours and on reasonable notice. You also may request a copy of the information in person. The ICRA may not charge you more than the actual copying costs for providing you with a copy of your file. A summary of all information contained in the ICRA's file on you that is required to be provided by the California Civil Code will be provided to you via telephone, if you have made a written request, with proper identification, for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or charged directly to you.

By requesting a copy be sent to a specified addressee by certified mail. ICRA's complying with requests for certified mailings shall not be liable for disclosures to third parties caused by mishandling of mail after such mailings leave the ICRA's.

"Proper Identification" includes documents such as a valid driver's license, social security account number, military identification card, and credit cards. Only if you cannot identify yourself with such information may the ICRA require additional information concerning your employment and personal or family history in order to verify your identity.

The ICRA will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information contained in files maintained on you. This written explanation will be provided whenever a file is provided to you for visual inspection.

You may be accompanied by one other person of your choosing, who must furnish reasonable identification. An ICRA may require you to furnish a written statement granting permission to the ICRA to discuss your file in such person's presence.

Signature: _____

Date: _____