

COMPREHENSIVE VOLUNTEER

CONFIDENTIAL

Background Check Authorization

Print Name: _____
First Middle Last

Social Security Number: _____ - _____ - _____ Date of Birth: _____

Current Address Since: _____
Mo/Yr Street City State/ Zip

Previous Address From: _____
Mo/Yr Street City State/ Zip

Alias (AKA): _____
Last First Middle

California Driver's License Number: _____

CHECK ONE ONLY:

- Input boxes for \$7.00 Volunteer and \$13.00 Volunteer / Driver

The information contained in this application is correct to the best of my knowledge. I hereby authorize Southeastern California Conference and its designated agents and representatives to conduct a comprehensive review of my background verification of social security number, criminal history records from any criminal justice agency and driving records if needed.

Volunteer Signature Date

Church: _____ Assignment: _____

Pastor or Designee Signature Date

Background Verification Report received on: _____
Date

MAIL COMPLETED FORM TO:

Southeastern California Conference
Chin Kim, Associate Treasurer
P O BOX 79990
RIVERSIDE CA 92513

- Input boxes for Cleared and Not Cleared

Chin Kim, Associate Treasurer Signature