

**United Lutheran Church
Background Check
DISCLOSURE AND AUTHORIZATION**

[IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION]
DISCLOSURE REGARDING BACKGROUND INVESTIGATION

Thank you for your interest in being part of the ministry at United Lutheran Church! In order to protect both children and the adults who work with them, United Lutheran has created a policy called "Safe Congregation For Kids" under which we may obtain background information about you from a third party reporting agency.

You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative report. Please be advised that the nature and scope of the most common form of investigative report obtained with regard to applicants is an investigation into national criminal registry and, if you will be driving kids from the church, your driving history. This search will be conducted by:

LexisNexis Screening Solutions Inc
P.O. Box 105108
Atlanta, GA 30348-5108
1-800-845-6004

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and certify that I have read and understand this document. I hereby authorize the obtaining of a criminal background and/or driving record check by the Company at any time after receipt of this authorization. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by LexisNexis Screening Solutions Inc, another outside organization acting on behalf of the United Lutheran, and/or United Lutheran itself. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

Last Name: _____ First: _____ Middle Init: _____

Signature: _____ Date: _____

(If Under 18, parent signature): _____

PLEASE FILL OUT VOLUNTEER INFORMATION ON BACK

Background Check / Volunteer Information

Last Name:

First Name:

Middle Name:

Other Names/Alias:

Social Security #:

Date of Birth*:

Driver's License #:

State of Driver's License:

Present Address:

City/State/Zip:

Phone Number:

This information will be used for background screening purposes only and will not be used as hiring criteria.

ADVERSE ACTION NOTICE

In the event that a background check identifies an area of concern, one of the pastoral staff will consult with the person in question to determine if the issue is accurate, gaining additional information as appropriate.

If the issue is determined to be accurate, the pastor will notify the staff member of the appropriate area, for example, the Christian education director or the youth director. The staff member and pastor will work together to determine how this may affect their volunteer activities at United Lutheran.

The prospective volunteer has the right to appeal the decision of the staff member and pastor, in which case the matter will be brought before the executive committee for review.

RETURN COMPLETED FORM TO:

**Pastor Steve Timm
United Lutheran Church
628 W 5th St
Red Wing MN 55066**