

HYDE PARK UNITED METHODIST BACKGROUND CHECK INFORMATION FORM

Name					
Position for which you are st	affing/volunteering:				
Race Gen	e Gender Date of Birth				
Member of Hyde Park Unite	d Methodist? □ No	☐ Yes	If "Yes", how long?	_	
Current Address:					
Please list all former address	es for the last five years	(include street	address, city, county, state, and zip):		
Current Home Telephone:		Current Bus	_ Current Business Telephone:		
Email Address:	s: Social Security Number:				
Occupation, current employe	er, and business address:	:			
	one number and email a	ddress of at leas	t three references. You may use a pasto		
Name	Phone		Email Address		
1.					
2.					
3.					
Describe your background w paid experience you may hav		n and/or age gro	oup requested. Include church-related, v	olunteer, and	
	(See reverse of fo			

Signature	Date	
information, and this release may be sent to any reference. I also agree to hold hat Methodist Church, and the officers, employees, and volunteers thereof from any use I waive any right that I may have to inspect references provided on my behalf. I certify that the information I have provided is true and correct; if it is found that I understand it may be cause for dismissal. I understand that I am responsible for familiarizing myself with materials provide Church which describe ways to recognize child abuse and appropriate reporting p	the answers given are d by Hyde Park Uniterocedures.	or information.
The information that I have provided may be verified by contacting persons or or concerning me. I hereby release and agree to hold harmless from liability any personal transfer and the latter than the latte	son or organization tha	at provides
Please explain fully any Yes answers to the above questions. In addition, please e involving your background that would call into question your being entrusted with of young people. Attach additional page, if necessary.		
Current drivers' license number:		
Have you been convicted or plead guilty to a traffic offense within the last 5 years	s? Yes	No
Within the past 30 days have you abused alcohol, legal, or illegal drugs?	Yes	No
Have you been convicted of the possession, use, or sale of drugs?	Yes	No
Have any complaints or allegations of misconduct involving children ever been made against you?	Yes	No
Have you ever been charged with or convicted of child neglect or abuse?	Yes	No
Have you ever plead 'guilty' or 'no contest' to, or been convicted of a crime?	Yes	No

Date

Signature of Parent or Legal Guardian for Applicants Under the Age of 18