



**North Metro First Baptist Church
Background Check Update Permission
(Renewal to be completed every 3 years)**

The information provided on this document helps North Metro maintain a safe and secure environment. Please note that past mistakes will not necessarily negate you from serving in ministry at North Metro. All information requested below is required. The Social Security # and date of birth are necessary to complete the required background check. Your cooperation in providing ALL of the following information is greatly appreciated. All documents are kept in a secure location. Please note that background checks are updated every 3 years.

PERSONAL INFORMATION

(All information is required for a background check to be completed.)

Date_____

Name_____

Last	First	Middle	Maiden
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Are you a volunteer or employee? _____

If you are a volunteer, what ministry area do you work with?

Address_____

City_____ County_____ State _____ Zip _____

Phone () _____ **Date of Birth** _____

Email address _____

Social Security # _____

PLEASE READ AND ANSWER CAREFULLY

We understand that some, in their past, may have experimented with or had casual, isolated involvements or contacts with the following areas. We do not need to know about every isolated incident with such things as alcohol.

Based on the above clarification, please indicate whether you have had any present/past involvement, arrests, or convictions in the following areas:

	Present		Past	
	Yes	No	Yes	No
Child molestation	_____	_____	_____	_____
Illegal drugs	_____	_____	_____	_____
Alcohol related	_____	_____	_____	_____
Occult related	_____	_____	_____	_____
Pornography	_____	_____	_____	_____
Homosexuality	_____	_____	_____	_____
Other	_____	_____	_____	_____

If your response to any of the above is "Yes", would you be willing to discuss the matter in confidence, in a personal interview with the appropriate ministerial staff member. Yes_____ No_____

The information contained in this application is true and correct to the best of my knowledge. I understand and acknowledge that this application and any information provided to North Metro First Baptist Church in connection with this application shall remain strictly confidential. No information contained herein shall be disclosed to anyone other than the appropriate ministerial staff directly involved in the decision to accept or decline my application.

I hereby give my permission to run a personal background check.

Applicant's
Signature:_____Date:_____

OFFICE USE ONLY

Ministerial Staff or HR Personnel
Signature:_____Date:_____