

Mississippi Conference of The United Methodist Church Volunteer Background Investigation Release Form

In order to provide a secure environment for those to whom we provide services, our staff and volunteers, and our community, the Mississippi Conference of The United Methodist Church, by and through its agents and representatives, routinely procures background investigations on those who minister on the Church's behalf. Please understand that this policy helps us ensure that our services are delivered in a professional and safe manner. This may include procurement of a consumer report (as defined by the Fair Act) from MinistrySafe, LLC (dba Abuse Prevention Systems), a Consumer Reporting Agency.

By signing below, you grant permission to the Mississippi Conference of The United Methodist Church, by and through its agents and representatives, to obtain such a report now or at any point in the future in connection with your volunteer position. You also grant permission to all parties to release information regarding your character, previous or current military service, or criminal or civil litigation matters to Mississippi Conference of The United Methodist Church, by and through its agents and representatives, or to MinistrySafe, LLC (dba Abuse Prevention Systems), including information that may be deemed negative.

Signature of Applicant/Legal Guardian

Date

Identity Information

First Name:

Middle Name:

Last Name:

Other Names Used:
(maiden names or aliases)

Social Security Number: - -

Date of Birth: Month: Day: Year:

Current Home Address:

City: State: ZIP:

Drivers License State: Number:

Please list each city/county and state in which you have lived, worked, or attended school during the last ten years. Use a second form if necessary, to provide full disclosure.

City: OR County: State:

City: OR County: State:

City: OR County: State:

Select the background check level being requested.

- Level 1 \$10
- Level 2 \$30
- Level 3 \$23
- Level 4 \$42
- Level 5 \$52

