Permission to Obtain a Background Check

I, the undersigned applicant (also known as "consumer"), authorize The Evangelical Covenant Church through its independent contractor, LexisNexis, to procure background information (also known as a "consumer report and/or investigative consumer report") about me. This report may include my driving history, including any traffic citations; a social security number verification; present and former addresses; criminal and civil history/records; and the state sex offender records. I understand that I am entitled to a complete copy of any background information report of which I am the subject upon my request to The Evangelical Covenant Church if such is made within a reasonable time from the date it was produced. I also understand that I may receive a written summary of my rights under the Fair Credit Reporting Act.								
Signature:			Date:					
Current Name: _	First	Middle			Last			
Surname when y	ou received your SS#:							
Sumanic when y								
AKAs, maiden n	ames, other surnames, if applicable:							
If married, date of	of marriage:							
PLEASE LIST	ALL ADDRESSES FOR THE PAST S	EVEN (7) YEA	RS. USE B	ACK OF FO	ORM IF NI	ECESSARY.		
Current:	Street /P. O. Box (include apartment #)	Ci	y State	Zip Code	_ from	to		
Previous:					_ from	to		
	Street /P. O. Box (include apartment #)	Ci	y State	Zip Code				
Previous:	Street /P. O. Box (include apartment #)	Ci	y State	Zip Code	_ from	to		
Social Security Number:		_ He	Home Telephone Number:					
Date of Birth:	Gender							
□ Please email r	ne a copy of this report. Email Address:							
□ Please email a	copy of this report to my church. Email	Address:						

FORMS WHICH ARE INCOMPLETE OR ILLEGIBLE WILL NOT BE PROCESSED.

FOR OFFICE USE ONLY:			
Date received:	Date submitted:	Date completed:	Dbase updated:
Paid: Check	_ Cash C.Card	Invoice Confer	rence/Department: