

The following are my responses to questions about my criminal history (if any).

1. YES NO Have you ever been convicted or plead guilty before a court for any federal, state or municipal criminal offense? (Exclude minor traffic misdemeanors).
If yes, please provide details below.

State: _____ County: _____ Date of Offense: / /

Details of conviction:

2. YES NO Have you ever received deferred adjudication or similar disposition for any federal, state or municipal offense?
If yes, please provide details below.

State: _____ County: _____ Date of Offense: _____

Details of offense:

3. YES NO Have you ever received probation or community supervision for any federal, state or municipal offense? If yes, please provide details below.

State: _____ County: _____ Date of Offense: _____

Details of supervision:

4. YES NO Have you ever been convicted of any criminal offense in a country outside the jurisdiction of the United States? If yes, please provide details below.

Country: _____ City: _____ Date of Offense: _____

Details of conviction:

5. YES NO As of the date of this consent form, do you have any pending charges against you?
If yes, please provide details below.

State: _____ County: _____ Date of Arrest _____

Details of pending charges:

THIS SECTION IS TO BE USED TO LIST ALL COUNTIES AND STATES OF RESIDENCE SINCE HIGH SCHOOL GRADUATION OR AGE 18.

CITY/TOWN	COUNTY	STATE	COUNTRY
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I HEREBY CERTIFY THAT ALL INFORMATION PROVIDED IN THIS CONSENT FORM IS TRUE, CORRECT AND COMPLETE. "ALL OFFERS OF EMPLOYMENT/ VOLUNTEER ARE CONTINGENT UPON APPLICANT'S SUCESSFUL COMPLETION, AS DETERMINED IN EMPLOYER'S SOLE DISCRETION, OF THIS CRIMINAL HISTORY/BACKGROUND CHECK."

Signed this _____ day of _____, 20_____

APPLICANT (PRINT NAME) _____

APPLICANT'S SIGNATURE _____

CHURCH _____

CHURCH ADDRESS _____

DISTRICT _____

AUTHORIZED PERSON REQUESTING CHECK:

(PRINT NAME) _____

(SIGNATURE) _____