



## DISCLOSURE AND AUTHORIZATION 2.1

### DISCLOSURE AND AUTHORIZATION FOR CONSUMER REPORTS

In connection with my application for employment/licensure (including contract or volunteer services) or application to rent a dwelling with \_\_\_\_\_, I understand consumer reports will be requested by you ("Company"). These reports may include, as allowed by law, the following types of information, as applicable: names and dates of previous employers, reason for termination of employment, work experience, reasons for termination of tenancy, former landlords, education, accidents, licensure, credit, etc. I further understand that such reports may contain public record information such as, but not limited to: my driving record, workers' compensation claims, judgments, bankruptcy proceedings, evictions, criminal records, etc., from federal, state, and other agencies that maintain such records.

In addition, investigative consumer reports (gathered from personal interviews, as applicable, with former employers or landlords, past or current neighbors and associates of mine, etc.) to gather information regarding my work or tenant performance, character, general reputation and personal characteristics, and mode of living (lifestyle) may be obtained.

If I am hired/licensed, I understand that my employer can use this disclosure and authorization to continue to obtain such consumer reports throughout my employment/licensure, contract period or volunteer service.

#### Authorization

**I hereby authorize procurement of consumer report(s) and investigative consumer report(s) by Company. If hired (or contracted), this authorization shall remain on file and shall serve as ongoing authorization for Company to procure such reports at any time during my employment/licensure, contract or volunteer period. I authorize without reservation, any person, business or agency contacted by the consumer reporting agency to furnish the above-mentioned information.**

**This authorization is conditioned upon the following representations of my rights:**

I understand that I have the right to make a request to the Consumer Reporting Agency: AmericanChecked Inc., 4870 South Lewis Avenue, Suite 120, Tulsa, OK 74105; telephone: 800-975-9876 ("Agency") upon proper identification, to obtain copies of any reports furnished to Company by the Agency and to request the nature and substance of **all information** in its files on me at the time of my request, including the sources of information, and the Agency, on Company's behalf, will provide a complete and accurate disclosure of the nature and scope of the investigation covered by any investigative consumer report(s). The Agency will also disclose the recipients of any such reports on me which the Agency has previously furnished within the two year period for employment requests, and one year for other purposes preceding my request (California three years). I hereby consent to Company obtaining the above information from the Agency. I understand that I can dispute, at any time, any information that is inaccurate in any type of report with the Agency. I may view the Agency's privacy policy at their website: <http://americanchecked.com/privacy-policy>.

I understand that if the Company is located in California, Minnesota or Oklahoma, that I have the right to request a copy of any report the Company receives on me at the time the report is provided to the Company. By checking

the following box, I request a copy of all such reports be sent to me. Check here:



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As a California applicant, I understand that I have the right under Section 1786.22 of the California Civil Code to contact the Agency during reasonable hours (9:00 a.m. to 5:00 p.m. (CST) Monday through Friday) to obtain all information in Agency's file for my review. I may obtain such information as follows: 1) In person at the Agency's offices, which address is listed above. I can have someone accompany me to the Agency's offices. Agency may require this third party to present reasonable identification. I may be required at the time of such visit to sign an authorization for the Agency to disclose to or discuss Agency's information with this third party; 2) By certified mail, if I have previously provided identification in a written request that my file be sent to me or to a third party identified by me; 3) By telephone, if I have previously provided proper identification in writing to Agency; and 4) Agency has trained personnel to explain any information in my file to me and if the file contains any information that is coded, such will be explained to me.

I understand that if I am applying for employment in New York, that I have the right to receive a copy of Article 23-A of the New York Correction Law \_\_\_\_\_(initial if this applies).

I understand that if the report is provided to an employer in the State of Washington, that I can contact the following office for more information regarding my rights under Washington State Law in regard to these reports: State of Washington Attorney General, Consumer Protection Division, 800 5<sup>th</sup> Ave, Ste. 2000, Seattle, Washington 98104-3188, (206) 464-7744.

In connection with my application for employment/licensure (including contract or volunteer services) or application to rent a dwelling, I direct the following regarding my current employer: (please check one). Yes, my current employer may be contacted \_\_\_\_\_ / No, my current employer cannot be contacted \_\_\_\_\_

I understand that I have rights under the Fair Credit Reporting Act, and I acknowledge receipt of the Summary of Rights \_\_\_\_\_ (initials).

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

For identification purposes:

Social Security No. \_\_\_\_\_ Date of Birth \_\_\_\_\_

Driver License No. \_\_\_\_\_ State of Issue \_\_\_\_\_

**Screening Application for  
All Volunteer or Compensated Personnel**

**CONFIDENTIAL**

*The following policies reflect our commitment to provide protective care of the preschoolers, children and youth of Redeemer Christian Church. Some of the questions on this application deal with sensitive issues. It is not the desire of Redeemer Christian Church to embarrass you or invade your privacy. It is our main objective to protect the precious children with whom God has entrusted us, while also protecting you as a worker. Your completion of this application will help us meet our responsibilities to both our children and our workers.*

- 1.) Adults who have been convicted of either child sexual or physical abuse should not volunteer or be compensated for service in any church-sponsored activity for preschoolers, children and youth.
- 2.) Adult survivors of childhood sexual or physical abuse need the love and acceptance of this church family. Individuals who have such a history should discuss their desire to work with preschoolers, children or youth with one of our pastoral staff prior to engaging in any volunteer service.
- 3.) All adult volunteers working with preschoolers, children and youth are required to be active at Redeemer Christian Church for a minimum of six months.
- 4.) Adult volunteers (18 years and older) should observe the "two adult" rule with children up through 5<sup>th</sup> grade. This requires that adults are never alone with children 5<sup>th</sup> grade and under without an adult partner. For children 6<sup>th</sup> grade through 12<sup>th</sup> grade, adult volunteers should observe the "two adult" rule except in the following instances: a) with written parental consent, or b) at activities, events or meetings where there are at least four children present.
- 5.) Adult volunteers should immediately report any behaviors which seem inappropriate or abusive to a staff member.

**A. Personal**

Date \_\_\_\_\_

1. Name \_\_\_\_\_  
Phone \_\_\_\_\_ Date of Birth \_\_\_\_\_ SS # \_\_\_\_\_
2. Present Address \_\_\_\_\_  
City, State and Zip Code \_\_\_\_\_
3. Email Address \_\_\_\_\_
4. Have you ever been convicted of or pleaded guilty to a felony? Yes \_\_\_ No \_\_\_  
(If yes, please explain separately)  
Have you ever been accused of, charged with, or convicted or actual or attempted sexual molestation of a child/youth? Yes \_\_\_ No \_\_\_ (if yes, explain separately)
5. Were you a victim of abuse or molestation while a minor? \* Yes \_\_\_ No \_\_\_  
(\*if you prefer, you may refuse to answer this question, or you may discuss your answer in confidence with one of the staff rather than on this form. Answering "yes" or leaving the question unanswered will not automatically disqualify an applicant for preschool, children or youth work.)
5. Please indicate the type of work you prefer (preschool, children, youth): \_\_\_\_\_
6. Please indicate the date you would be available to begin: \_\_\_\_\_
7. What is the minimum length of commitment you can make (6 months, a year, etc)  
\_\_\_\_\_

**B. Church History and Prior Preschool, Children or Youth Work:**

1a. Name of previous church of which you were a member \_\_\_\_\_  
Address of previous church \_\_\_\_\_

1b. List names and addresses of other churches you have attended regularly within the past five years  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. List all previous volunteer and/or paid church work (include church's name, address, type of work, and dates) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. List all previous non-church work involving preschoolers, children or youth (include organization name, address, type of work and dates) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. List any gifts, callings, training, education or other factors that have prepared you to work with preschool, children, or youth \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C. Personal Reference (not former employers or relatives)**

Name 1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

**D. Applicant's Statement**

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application or other references or churches to give you any information (including options) that they may have regarding my character and fitness for preschool, children or youth work. In consideration of the receipt and evaluation of this application by Redeemer Christian Church, I hereby release any individual, church, organization, charity, employer, reference, or any person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply, with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application or other persons or organization.

1. Should my application be accepted, I agree to be bound by the policies of Redeemer Christian Church and refrain from unscriptural conduct and teaching in the performance of my services on behalf of the church.
2. I further state that I have carefully read the foregoing release and know the contents thereof and I sign this release as my own free act. This is a legally binding agreement which I have read and understood.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

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