

NORTH PRESBYTERIAN CHURCH
BACKGROUND CHECK AUTHORIZATION FORM

I, _____, hereby authorize North Presbyterian Church, Williamsville, NY to obtain and/or request information about my criminal history from any entity chosen specifically for conducting this search, to release information regarding any record of charges or convictions contained in its files, or in any criminal file maintained on me, whether said file is a local, state, or national file, and including but not limited to accusations and convictions for crimes committed against minors, to the fullest extent permitted by city, county, state, and federal law. I do release said entities from all liability that may result from any such disclosure made in response to this request. I may revoke this request at any time, but that revocation must be in writing and give 30 days' notice of same.

Signature of Applicant _____ Date _____

Name (Last) (First) (Middle)

Address City State ZIP Code

Other names used by applicant, including maiden name

Date of Birth Social Security Number

Driver License Number Issuing State License Expiration Date