Northcliffe CHURCH

Volunteer Background Check Approval Form

Name: _____ Birthdate: _____
Last First Middle

List any Alias' you have gone by: _____ Gender: Male Female

Address _____
Street City State Zip

Telephone _____ _____
Home Cell

Social Security # _____ Email: _____

Do you have a current driver's license? Yes __ No __ Number_____ State _____

Authorization

The information contained in this application is correct to the best of my knowledge. I, the undersigned, give my authorization to Northcliffe Baptist Church, operating as Northcliffe Church, or its representatives to release any and all records or information relating to being a Volunteer at Northcliffe Baptist Church. Northcliffe Baptist Church may request and contact references as deemed necessary in order to verify my suitability as a volunteer. I also understand that the personal information will be held confidential by Northcliffe Baptist Church leadership. I approve Northcliffe Baptist Church to perform any background check, driving checks, or have any other related record reviewed.

I understand that the personal information in this application will be held confidential by the professional Church staff.

Signature: _____ Today's Date: _____