**BETHANY FIRST CHURCH OF THE NAZARENE** **RELEASE OF RECORDS**

Department or Ministry: _____

Name: _____
First Middle Last

Alias Name/Maiden Name: _____ Social Security # (REQUIRED): _____

Birth Date (REQUIRED): _____ Gender: ___ M ___ F Phone Number: _____
Month/Day/Year

Email (REQUIRED): _____

Driver's License #: _____ State: _____ Expiration Date: _____

Address: _____
Street City State Zip

Previous Address: _____
Street City State Zip

I, _____, give permission to the Business Administrator of Bethany First Church of the Nazarene to do a background check about any possible criminal history I might have. I understand that this information will be held in confidence and not released to any outside sources.

Please answer yes or no to the following questions. If your answer is "yes," please explain.

- Has a civil lawsuit alleging actual or attempted discrimination, harassment, exploitation, physical abuse, child abuse, or moral misconduct ever been filed against you, whether or not it resulted in a judgment being entered against you, was settled out of court, or was dismissed?
  □ No □ Yes (please explain) _____

- Have you ever terminated your employment or service in a volunteer position or had your employment or authorization to hold a volunteer position terminated for reasons relating to allegations of actual or attempted discrimination, harassment, exploitation, physical abuse, or moral misconduct?
  □ No □ Yes (please explain) _____

- Is there any fact or circumstance involving you or your background that will call into question you being entrusted with the responsibilities for which you are applying?
  □ No □ Yes (please explain) _____

- Are you required to register with any state for any criminal or sexual offense?
  □ No □ Yes (please explain) _____

- Have you ever used an illegal substance or abused alcohol or other substance?
  □ No □ Yes (please explain) _____

- Have you ever been convicted of a criminal offense other than a minor traffic violation?
  □ No □ Yes (please explain) _____

Signature of Applicant _____ Date _____
(Revised as of March 23, 2021)