Appendix C Authorization and Request for Criminal Record Check St. Mark United Methodist Church

We welcome your application to volunteer with SMUMC. We are proud of our success and recognize it is the result of the quality and caliber of the volunteers in our organization. In pursuit of that excellence we require, as a condition to working with children, youth or vulnerable adults that all volunteers consent to and authorize reference and criminal background checks. ______, hereby authorize SMUMC to request information regarding any record of charges or convictions contained in any criminal file maintained on me, whether said file is a local, state, or national file. Including, but not limited to accusations and convictions for crimes committed against minors, to the fullest extent permitted by state and federal law. I release SMUMC, police and sheriff's departments or any agency used to obtain information from all liability that may result from any such disclosure made in response to this request. Signature of Applicant Date Print applicants full name: ______ Print all other names that have been used by applicant (if any): **Current address:** Street / P.O. Box State City Zip List all previous addresses if less than 7 years: Date of birth: ______ Place of birth: _____ Driver's license number: State issuing license: License expiration date: ______ Social Security number: _____

All information acquired during the recruiting of staff and volunteers shall be treated in a completely confidential manner.

The cost to conduct a background check is \$10. This will be paid for by the Church. However, should you wish to make a donation to the church to help defray this cost, it would be greatly appreciated.