

**VIRGINIA CHURCH OF GOD OF PROPHECY ADMINISTRATIVE OFFICES
CONSENT TO PERFORM A HISTORY/BACKGROUND CHECK
IN COMPLIANCE WITH THE FCRA (FAIR CREDIT REPORTING ACT)**

Last Name	First Name	Middle Name or Initial
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Maiden or other name(s) used in any and all other records of birth or records of residence.

* Address	Apartment or #
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City	County	State	Zip
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** Date of Birth	Social Security Number	**Gender	**Race
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**Drivers License Number	**State of Issue
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***AS SHOWN ON THE ORIGINAL APPLICATION
**TO BE USED FOR CRIMINAL HISTORY CHECKS / CREDIT REPORTS / MOTOR VEHICLE
REPORTS ONLY AND NOT A PART OF THE PERSONNEL FILE.**

I, _____, am an applicant for employment with the CHURCH OF GOD OF PROPHECY. As a part of the application process I have been advised that the Administrative Office conducts a criminal history check that may include a credit report and or motor vehicle report. I do hereby consent to the use of any and all information provided to the district in the application process to be used in the criminal history/background check.

The following are my responses to questions about my criminal history (if any).

1. ___ YES ___ NO Have you ever been convicted or plead guilty before a court for any federal, state or municipal criminal offense? (exclude minor traffic misdemeanors).
If yes, please provide details below.

State:	County:	Date of Offense: / /
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Details of conviction:

2. ___ YES ___ NO Have you ever received deferred adjudication or similar disposition for any federal, state or municipal offense?
If yes, please provide details below.

State:	County:	Date of Offense:
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Details of offense:

3. ___YES ___NO Have you ever received probation or community supervision for any federal, state or municipal offense? If yes, please provide details below.

State: _____ County: _____ Date of Offense: _____

Details of supervision:

4. ___YES ___NO Have you ever been convicted of any criminal offense in a country outside the jurisdiction of the United States? If yes, please provide details below.

Country: _____ City: _____ Date of Offense: _____

Details of conviction:

5. ___YES ___NO As of the date of this consent form, do you have any pending charges against you? If yes, please provide details below.

State: _____ County: _____ Date of Arrest: _____

Details of pending charges:

THIS SECTION IS TO BE USED TO LIST ALL COUNTIES AND STATES OF RESIDENCE SINCE HIGH SCHOOL GRADUATION OR AGE 18.

CITY/TOWN	COUNTY	STATE	YEARS LIVED
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I HEREBY CERTIFY THAT ALL INFORMATION PROVIDED IN THIS CONSENT FORM IS TRUE, CORRECT AND COMPLETE. IF ANY INFORMATION PROVES TO BE INCORRECT OR INCOMPLETE. I UNDERSTAND THAT GROUNDS FOR CANCELING OF ANY AND ALL OFFERS OF EMPLOYMENT WILL EXIST AND MAY BE USED AT THE DISCRETION OF THE CHURCH.

Signed this _____ day of _____, 20_____

APPLICANT (PRINT NAME) _____

APPLICANT'S SIGNATURE _____