

Permission to Obtain a Background Check

(This form authorizes the church to obtain background information and must be completed by the applicant. Heartland Church Network must keep this completed form on file for at least two years after requesting a background check.)

I, the undersigned applicant (also known as “consumer”), authorize **Heartland Church Network** through its independent contractor, First Advantage, to procure background information (also known as a “consumer report and/or investigative consumer report”). This report may include my driving history, including any traffic citations; a social security number verification; present and former addresses; criminal and civil history/records; criminal background check, and the state sex offender records.

I understand that I am entitled to a complete copy of any background information report of which I am the subject upon my request to **Heartland Church Network**, if such is made within a reasonable time from the date it was produced. I also understand that I may receive a written summary of my rights under the Fair Credit Reporting Act.

Signature: _____ Date: _____

Identifying Information for Background Information Agency

(also known as “Consumer Reporting Agency”)

Print Name: _____

First
Middle
Last

Other Names Used (alias, maiden, nickname): _____

Current Address: _____

Street /P. O. Box
City
State
Zip Code
County

Former Address: _____

Street /P. O. Box
City
State
Zip Code
County

Social Security Number: _____ Daytime Telephone Number: _____

Driver’s License Number: _____ State of Issuance: _____ Date of Birth: _____ Gender _____

HCN OFFICE USE ONLY:

_____ PAID for Background Check Church _____

Date Processed: _____ Processed By: _____ Approved: **Yes or No**