

Yearly Screening/Background Check Form for Paid Employees and Unpaid Volunteers Working With Minor Children

Name (Last, First, Middle) State ID #: or DL #: Social Security Number (REQUIRED)			Maiden Name Date of Birth			
Gender (please check appropria Race (please check appropriate		Female				
White Black Ar	nerican Indian (for backgrou		cific Islander poses only)	Hispanic	Other	
Present Address						
State Zip Cod	e No.	of Years at T	This Address			
Phone	Email					
Occupation	Work Phone					
If you have lived at your current the last 10 years.	address for less tha	n ten (10) yea	ers, list all addresse	s where you have	e lived during	
Address	City	State	Zip Code	Time Lived Th	ere	
Address	City	State	Zip Code	Time Lived There		
Address	City	State	Zip Code	Time Lived Th	ere	
Have you ever been convicted of a of Are there any legal charges pending		No				
Have you ever been arrested for, ch	arged with, under pr	robation for, o	r convicted of eithe	er sexual or physic	cal abuse?	
Yes No						
If yes to any of these, please attach	an explanation.					
Personal References (3)						
NameAd	dress			Phone		
	dress					
NameAd	dress					

PLEASE SIGN ON REVERSE

WORKER'S STATEMENT

The information contained in this screening form is correct to the best of my knowledge. I authorize any references to give you any information, including opinions, which they may have regarding my character and fitness for work with minors. Each reference will be asked to submit the name of one person used as a reference. In consideration of the receipt and evaluation of this application by Valley Christian School, I hereby release any individual, church, youth organization, charity, employer, reference or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me or my references in this screening form.

Should my application be accepted, I agree to be bound by the Bylaws and Policies of Valley Christian School and to refrain from unscriptural conduct in the performance of my services on behalf of Valley Christian School.

I further state that I have carefully read the forgoing release and know the contents thereof, and sign this release as my own free act. This is legally binding agreement which I have read and understand.

BACKGROUND INVESTIGATION CONSENT

I, ______ (applicant complete name), hereby authorize Valley Christian School and/or its agents to make an independent investigation of my background, references, character, past employment, education, criminal, or police records for the purpose of confirming the information contained on my application and/or obtaining other information, which may be material to my qualifications for employment now, and if applicable, during the tenure of my employment with Valley Christian School.

I release Valley Christian School and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims, or lawsuits in regards to the information obtained form any and all of the above referenced sources used.

Print Name _____ Date _____

Applicant's Signature _____

This signature represents my current legal name and any previously used names are listed below:

Additional Names: