

# First Baptist Church, Burleson

## Criminal Records Check & Screening Form For Those Working With Minors or Mentally Handicapped

This form is to be completed for any position (paid or volunteer) involving the supervision or care of minors or the mentally handicapped. This is being used to provide a safe and secure environment for the activities and programs of the church.

Name \_\_\_\_\_  
Last First Middle Maiden

Sex: \_\_\_ Male \_\_\_ Female

ID or DL # \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(Identity MUST be confirmed with a driver's license or DPS identification card.)

Do you have a driver's license from another state? \_\_\_\_\_ If yes, which state? \_\_\_\_\_

Social Security # \_\_\_\_\_

Present address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_

If less than 3 years:

Previous Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_

The following are my responses to questions about my criminal history:

Have you ever been arrested for, charged with, on probation for, received deferred adjudication, or convicted of either sexual or physical abuse, or a felony?

\_\_\_\_\_ yes \_\_\_\_\_ no. If yes, Please explain \_\_\_\_\_

\_\_\_\_\_

Are there any criminal charges pending against you? \_\_\_ Yes? \_\_\_ No? If yes, please explain \_\_\_\_\_

\_\_\_\_\_

Please list other churches or organizations that you have previously volunteered with:

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Personal References (3)

Name	Address	Telephone
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

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

Signature: \_\_\_\_\_

Additional Names: \_\_\_\_\_  
\_\_\_\_\_

**WORKER'S STATEMENT**

I, \_\_\_\_\_ (applicant complete name), hereby authorize First Baptist Church, Burlson and/or its agents to make an independent investigation of my background, references, character, past employment, education, criminal, or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my application.

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 or the mentally handicapped. In consideration of the receipt and evaluation of this application by First Baptist Church, Burlson, 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 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 First Baptist Church, Burlson and to refrain from unscriptural conduct in the performance of my services on behalf of First Baptist Burlson.

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

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 2007

Applicant (Print Name) \_\_\_\_\_

Applicant's Signature \_\_\_\_\_