

# Applicant Authorization and Release

I \_\_\_\_\_ authorize Intellicorp Records, Inc. to run background check ordered by the company listed below.

OFFICE USE ONLY

## Requesting Agency/Address

Peninsula Baptist Church

I certify this request is made pursuant to and for the purpose indicated.

Authorized Signature \_\_\_\_\_

Date \_\_\_\_\_

Title \_\_\_\_\_

Area Code/Phone Number \_\_\_\_\_

## For Administrative use ONLY

- AWANA
- Jesus Town
- Peninsula Kids
- Peninsula Students
- Nursery
- OWL: Overnight Winter Lodging
- Other

Ministry Leader \_\_\_\_\_

## Applicant of Inquiry: (Please Print)

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Former Last Name: \_\_\_\_\_

DOB \_\_\_\_\_  
Month/Day/Year

SSN: \_\_\_\_\_

Gender: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Physical Address: \_\_\_\_\_  
Street City State Zip

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

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

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

Email: \_\_\_\_\_

I have the right to make a request to **IntelliCorp Records, Inc.**, upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including sources of information, and the recipients of any reports on me which **IntelliCorp Records, Inc.** has previously furnished within the two year period preceding my request. I certify that all of elements of the personal data I have provided are true, accurate and complete. I understand and agree that any omission, false statement, misleading statement, or answer made by me on my application or any supplements to it and in any interviews will be sufficient grounds for rejection of employment and my discharge after employment.

Printed Name \_\_\_\_\_

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_