

**Maine District Church of the Nazarene
Employee/Volunteer Background Search
Authorization and Liability Release**

The purpose of this form is to notify me that a Background Report will be conducted on me in the course of consideration for employment/volunteer service with or through the Maine District Church of the Nazarene and/or its boards, councils, and auxiliaries. I understand that this report may be used to make decisions about my employment/volunteer service, including one or more of the following: hiring, firing, promotion, reassignment and/or access to facilities. If information is gathered from a consumer-reporting agency, under the Fair Credit Reporting Act I am entitled to know if employment will be and is ultimately denied because of such information. The investigation will be conducted by the Maine District Church of the Nazarene and will include, but may not be limited to, the following searches for which I give my specific consent. I hereby authorize all public and private record holders of such information to release same to the Maine District Church of the Nazarene.

Please initial on the adjacent lines boxes to indicate your consent to each search required for your specific placement.

_____ Felony and misdemeanor criminal record search _____ Driving/Driver's License Record

_____ Professional licensing; list licenses held, state of issue and number:

_____ Credit report _____ Verification of past employment and salary:
_____ Verification of education You ___ May ___ May Not contact my current employer

Indicate year of attendance or graduation, location of campus and name under which you attended:

_____ Drug screen (if requested) A chain of custody form will be provided for you to take with you to the lab for testing.

_____ Maine Child Protective Services Central Cases Records Search

_____ Other searches as the Maine District Church of the Nazarene may deem necessary

I understand that this report shall be held in strictest confidence, except that I give permission to the Maine District Church of the Nazarene to share the information internally (including with its boards, councils, auxiliaries, officers, and representatives), as it deems necessary to ensure the welfare of those with whom I may have contact in my capacity as an employee/volunteer of the Maine District Church of the Nazarene or its boards, councils, and/or auxiliaries. INITIALS:

I understand that I have the right to inspect the report at the office of the district representative who initiated and received the report during normal business hours and after reasonable notice. I can also inspect the report by certified mail or by telephone. I must show proper identification, pay for any costs involved with the inspection, and have the right to be accompanied by one other person who must also show proper identification. The district representative will explain any of the information in the report and will provide a written explanation of any coded information. I understand that I may request additional information about the nature and scope of the investigation and a summary of my rights under the consumer reporting laws. INITIALS: _____

I release the Maine District Church of the Nazarene (including its boards, councils, auxiliaries, officers, and representatives) and all other persons from all claims, liability, and damages that may result from negligently investigating, furnishing, communicating, reviewing, or evaluating information pursuant to this investigation and from the use of the report. This release means I am waiving claims for negligence, misrepresentation, emotional distress, invasion of privacy and any other

negligent act. I expressly intend that this release is as broad and inclusive as is permitted by law. Also, if any portion of this release is held invalid, the balance will continue in full legal force. INITIALS: _____

I've read this Notice and the Authorization and Liability Release and understand and agree with each of its terms. I authorize all persons and organizations that may have information relevant to this research to disclose such information to The Maine District Church of the Nazarene or its authorized agents. I hereby release Maine District Church of the Nazarene, (including its boards, councils, auxiliaries, officers, and representatives), and all persons and organizations providing information from all claims and liabilities of any nature in connection with this research. I hereby further authorize that a photocopy of this authorization may be considered as valid as the original.

Signature Date

First Name: _____ Middle: _____ Last: _____

Other names used (list names & dates of use):

Date of birth: _____ Social Security Number: _____

Drivers License Number/State: _____

Current address:

Address: _____ Apt.#: _____

City/State/Zip: _____

Other states in which I have resided (include schooling & military):

I wish to receive a copy of my background report: ____ Yes ____ No

If Yes, send the copy to me at:

Address: _____ Apt.#: _____

City/State/Zip: _____

Signature Date

List 3 references (do not include your present pastor):

| | | | |
|---------------|------------------|----------------|----------------|
| _____ Name | _____ Address | _____ Phone | _____ Email |
| _____ Name | _____ Address | _____ Phone | _____ Email |
| _____ Name | _____ Address | _____ Phone | _____ Email |

Mail this completed form to:
Maine District Church of the Nazarene
c/o Rev. John Grant
Employee & Volunteer Processing
23 Motley St
Portland, ME 04102