

The Protestant Episcopal Church in the Diocese of SC

Notification/Release of Information Form

Revised Dec. 15, 2016

The purpose of this form is to notify you that a background check will be conducted on you in the course of consideration for employment with (please print clearly):

****PLEASE INCLUDE A COPY OF A DRIVER'S LICENSE OR OTHER LEGAL ID****

Church Name: _____

Requested background check: criminal only criminal/credit criminal/credit/drivers

Last Name: _____ First: _____ Middle: _____

Date of Birth: _____ Age: _____ Male Female

Social Security Number: _____

Driver's License Number: _____ State of Issue: _____

Current Address: _____

City: _____ State: _____ Zip: _____

In connection with this request I authorize all corporations, former employers, credit agencies, educational institutions, law enforcement agencies, city, state, county and federal courts, and military services to release information about my background, including, but not limited to, information about my employment, education, consumer credit history, driving record, criminal record, and general public record history to the person or company with which this form has been filed, or their agents, This releases the aforesaid parties from any liability and responsibility for the collection of the above information.

Applicant's Signature: _____

Date: _____

Clergy requests: email or fax Beth Snyder, bsnyder@dioceseofsc.org or 843-723-7628

Lay requests: email or fax Susan Burns, sburns@dioceseofsc.org or 843-662-7077