AUTHORIZATION REGARDING BACKGROUND INVESTIGATION

By signing below, I acknowledge receipt of the following separate documents (and certify that I have read and understood them):

- DISCLOSURE REGARDING BACKGROUND INVESTIGATION;
- A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT; and
- ADDITIONAL STATE LAW NOTICES.

By signing below, I also authorize Metropolitan Community Church of Richmond to obtain "consumer reports" (deemed "investigative consumer reports" under California law) about me at any time during the hiring process and throughout my employment, if applicable.

Signature: _____ Date: _____

Printed Name: _____

PERSONAL INFORMATION NEEDED FOR BACKGROUND CHECK

Please supply the following information to facilitate a background check on you.

Personal Information				
Last Name			Middle	Date of Birth (MM/DD/YYYY)
Other Name(s) Maiden/Married				
Driver's License Number		Issuing State		
Email Address		Telephone		

Residences (starting with current)			
Street Address	City/State	Zip	How Long?
Street Address	City/State	Zip	How Long?
		r	
Street Address	City/State	Zip	How Long?
Street Address	City/State	Zip	How Long?
Street Address	City/State	Zip	How Long?