Background Check is being done for/by the Baptist Student Ministry of Grayson County

This form MUST be complete (front' & back) or it will be returned to you!

## Baptist Student Ministry, Grayson College

## CONSENT TO PERFORM A BACKGROUND CHECK

## IN COMPLIANCE WITH THE FCRA (FAIR CREDIT REPORTING ACT)

<u>Last Name</u>	First Name		Middle Name or Initial	
Maiden or other name(s)	used in any and all other records o	f birth or records of	Fresidence.	
Address	Apartment or #		Years Lived at this Residence?	
Home Phone:	Daytime #		Work/Cell/Phone	
City	County	State	Zip	
Date of Birth	SS Number (Optional)	Gender	Race	
Drivers License Number		State of Issue		
OF THE PERSONNEL I  1, of the application process report and or, motor vehi	FILE. am an applicant for employ is I have been advised that the district	ment with the et conducts a crimin te use of any and all	CHURCH. As a part all history check that may include a credit information provided to the district in the	
The following are my res	ponses to questions about my crimi	nal history (if any).		
	NO Have you ever been ense? (exclude minor traffic misder		guilty before a court for any federal, state ovide details below.	
State:	County: Da	te of Offense:		
Details of conviction:				
	NO Have you ever received e? If yes, provide details below.	d deferred adjudicat	tion or similar disposition for any federal,	
State: C	County: Date of Off	fense:		
Details of offense:				

State:					
	County:	Date of Offense:			
Details of Superv	vision:				
YI	ESNO Have y	ou ever been convicted of a	any criminal offense	e in a country out	
	the United States? If yes, pl			J	
County:	City:	Date of Offense:			
Details of convict	ion:				
	SNO As of the	e date of this consent form,	do you have any pe	ending charges ag	
ou? If yes, please	provide details below.				
State:	County:	Γ	Date of Arrest		
Details of pending	g charges:				
	g charges: PLETE: LIST ALL CO	OUNTIES AND STATES	OF RESIDENCE	FOR THE	
MUST COMI	PLETE: LIST ALL CO	OL GRADUATION OR A	GE 18.		
	PLETE: LIST ALL CO		GE 18. YEARS L	IVED	
MUST COMI	PLETE: LIST ALL CO	OL GRADUATION OR A	GE 18.  YEARS L		
MUST COMI	PLETE: LIST ALL CO	OL GRADUATION OR A	GE 18. YEARS L	IVED to	
MUST COMI	PLETE: LIST ALL CO	OL GRADUATION OR A	YEARS L	IVED to to	

After Completion Return form to: BSM Grayson

6101 Grayson Dr Denison, Texas 75020

Or scan and email form to:

bsmgrayson@gmail.com