



AUTHORIZATION FOR BACKGROUND CHECK

I _____ authorize Open Word Christian Ministries, Inc. or their agents to solicit background information relative to my criminal record history. I understand that Open Word Christian Ministries, Inc. may conduct inquiries into my background that may include criminal records, personal references, and other public record reports pertaining to me.

I authorize without reservation, any person, agency, or other entity contacted by Open Word Christian Ministries, Inc. or their agents for purposes of obtaining background report information, to furnish the above-mentioned information.

I release Open Word Christian Ministries, Inc., their respective employees and/or their agents, and all persons, agencies and entities providing information or reports about me, from any and all liability arising out of furnishing any such information or reports.

(Notary)

(Applicant's Signature)

Notary Public _____, Georgia
(County)

My commission expires: _____
(Date)

Please fill in (print) the information below completely.

Social Security No. _____ - _____ - _____ Date of Birth _____
(mm/dd/yy)

Sex - Male Female Race _____

Driver's License Number _____

Last Name _____ Maiden Name _____

First Name _____ Middle Name _____

Address _____

City _____ State _____ Zip Code _____

How long have you lived at the above address? _____

If less than 7 years, please list all addresses for the last 7 years.

Address _____ City _____ State _____

Address _____ City _____ State _____

Address _____ City _____ State _____

Address _____ City _____ State _____

Address _____ City _____ State _____
