



## Background Request Form

Check which role you applying for:  Staff Hire  Volunteer

Ministry requesting background check \_\_\_\_\_

If known, what will be your position? \_\_\_\_\_

Person to be notified when request is complete \_\_\_\_\_

Their phone number or SBC extension \_\_\_\_\_

### Please print all information clearly

Name (first, middle, last, suffix) \_\_\_\_\_

Email address \_\_\_\_\_

Street address \_\_\_\_\_

\_\_\_\_\_

Maiden name if married one year or less \_\_\_\_\_

Check one:  Male  Female

Birth Date (MM/DD/YYYY) \_\_\_\_\_

Social Security Number \_\_\_\_\_

*Please submit form in person to your ministry supervisor or to the Finance Office.  
Your social security number will be disposed of as soon as the background check is complete.*

**OFFICE PURPOSES ONLY**

**Date request received by Finance**

\_\_\_\_\_

## Disclosure and Release Authorization

*Disclosure:* In the interest of maintaining the safety and security of our congregation and employees, Scottsdale Bible Church will conduct a background check report on you in connection with your employment/volunteer application. IntelliCorp Records Inc. will prepare the report.

The background check report will/may contain information bearing on your character, general reputation and personal characteristics. The types of information that may be obtained include but are not limited to: Social Security number verification, criminal, public and driving record checks. The information will be obtained from private and public record sources. These reports will be used for employment/volunteerism purposes only.

*Release Authorization:* I hereby authorize verification of all information in my employment/volunteer application from all sources of employment, motor vehicle and criminal history, and authorize any duly authorized agent of IntelliCorp Records, Inc. to obtain, whether the said records are public or private, and including those which may be deemed to be privileged or confidential in nature. I release all persons from liability on account of such disclosures. Information appearing on this Authorization will be used exclusively by IntelliCorp Records, Inc. for identification purposes and for the release information which will be considered in determining any suitability for employment/volunteerism. I certify that I have made true, correct, and complete answers and statements on my employment/volunteer application.

I have the right to make a request to IntelliCorp Records, Inc, upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including sources of information, and the recipients of any reports on me which IntelliCorp Records, Inc has previously furnished within the two years period preceding my request.

I, the undersigned, have read and fully understand the above notice.

Signature \_\_\_\_\_ Date \_\_\_\_\_