

APPENDIX 7 – HOPE UCC – PAGE 1
BACKGROUND CHECK CONSENT/SIGNATURE AUTHORIZATION

Prior to beginning duties, each Hope UCC employee, volunteer and Authorized Clergy candidate who desires to work with youth, vulnerable adults or is in a position of power or authority over others will have a background check completed. ALL INFORMATION ON THIS FORM IS CONFIDENTIAL.

PERSONAL DATA REQUIRED FOR BACKGROUND CHECK

First Name	Middle Name	Last Name
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Street Address	City	State	Zip Code
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Phone	Email Address
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Date of Birth _____

I have been a member of this church since _____

I have been a friend of this church since _____

Do you have a valid driver's license? Yes ____ No ____

Check one response for each of these five statements:

- I have never been convicted of, nor pled guilty or no contest, to a crime.
True ____ Not True ____
- I have never terminated my employment, professional credential, or service in a volunteer position or had my employment, professional credentials, or authorization to hold a volunteer position terminated for reasons related to allegations of actual or attempted sexual discrimination, harassment, exploitation, or misconduct; physical abuse; child abuse; or financial misconduct. True ____ Not True ____
- No civil lawsuit alleging actual or attempted sexual discrimination, harassment, exploitation, or misconduct; physical abuse; child abuse; or financial misconduct has ever resulted in a judgement being entered against me, been settled out of court, or been dismissed because the statute of limitations has expired. True ____ Not True ____

- With respect to my driving record, I have not had my license suspended or revoked within the last five years due to reckless driving or driving while intoxicated and/or under the influence of a controlled substance. True ____ Not True _____
- Is there any fact or circumstances involving you or your background that would call into question your being entrusted with the responsibilities of the position for which you are applying? Yes ____ No ____

If you checked Not True or Yes to any of the previous five statements please provide a brief explanation on a separate sheet and attach to this application.

List two references not related to you:

Name: _____ Phone: _____

Name: _____ Phone: _____

I have received, read, and understand:

- Hope UCC SafeConduct™ Policy & Procedures

The covenant between persons seeking authorized volunteer **or employee** positions in the church require honesty, integrity, and truthfulness for the health of the church. To that end, I attest that the information set forth in this application is true and complete. I understand that any misrepresentation or omission may be grounds for rejection of consideration for, or termination of, the position I am seeking to fill. I acknowledge that it is my duty in a timely fashion to amend the responses and information I have provided if I come to know that the response or information was incorrect when given or, though accurate when given, the response or information is no longer accurate.

Beginning such relationship with an open exchange of relevant information builds the foundation for a continuing and healthy covenant between volunteers/**employees** and the church they seek to serve. To that end, I authorize Hope UCC and/or its agents to make inquiries regarding my character and qualifications, including all statements I have set forth above. I also authorize all entities, persons, former employers, supervisors, courts, law enforcement, and other public agencies to respond to inquiries concerning me, to supply verification of the statements I have made, and to comment on and state opinions regarding my background, character, and qualifications. To encourage such persons and entities to speak openly and responsibly, I hereby release them from all liability arising from their responses, comments, and statements.

Hope UCC's authorized volunteer **and employee** recruitment process involves the sharing of information regarding applicants with those persons in a position to recruit, secure, and supervise both the position I am seeking to fill and program I am seeking to participate in. To that end, I authorize Hope UCC and its agents to circulate, distribute, and otherwise share information gathered

in connection with this application to such persons for these purposes. I understand that Hope UCC will share with me information it has gathered about me, if I request them to do so.

I authorize Hope United Church of Christ to conduct reference checks and obtain consumer and or investigative consumer reports (background checks) about me from a consumer reporting agency in considering me for volunteering, hiring, promotion, assignment, reassignment, retention, discipline, or other employment purposes.

By signing below, I also acknowledge that the facsimile (FAX) or photocopy of this document shall be valid and accepted with the same authority as the original. I agree that, as a volunteer or employee of Hope United Church of Christ, this authorization will remain in effect throughout that commitment or term, or to the extent allowed by law.

Print Name & Sign: _____ Date: _____

Print Name & Signature of Parent or Guardian for applicants under 18
_____ Date: _____

APPLICANT INSTRUCTIONS:

Please check which position this background check is for:

- Children/Youth Volunteer Leadership Volunteer Employee

Return this form in sealed envelope to Hope Church Office attention of "Background Check".

For Office Use Only

Results: WI Circuit Court Access (WCCA) Trusted Employers National Sex
Offender Registry (NSOR) Result: _____
Background check completed by: _____ Date: _____
Minister's Signature: _____ Date: _____