

The Kirk Volunteer Authorization to Release Background Information

Please select the campus you are volunteering at: Kirk of the Hills _____ Kirk Crossing _____

Please select the ministry you are volunteering with:

_____ Missions
_____ Kiddos
_____ Kids

_____ Students
_____ Community of Friends

In connection with my application for volunteer service with The Kirk, I authorize The Kirk and or, Paycom, their agent, to solicit background information relative to my criminal record history. I understand that The Kirk may conduct inquiries into my background that may include criminal records, motor vehicle records, and personal references pertaining to me. When requested by an employer motor vehicle records or a driving history may be obtained.

I authorize without any reservation, any person, agency, or other entity contacted by The Kirk or Paycom, their agency for purpose of obtaining background report information, to furnish the above-mentioned information.

I release The Kirk, their respective employees or Paycom, their agent and employees 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.

PLEASE PRINT (Use Blue or Black Ink)

Requested by: 422575

Full Legal Name _____ Date of Birth _____

Other Names Used _____ SS# _____

Drivers Lic # _____ State Issued _____

Name exactly as it appears on Drivers License _____

Please note: If your address is a rural rout, or post office box, we must have City and County where mail was delivered

Current Address _____ City _____ Co. _____ St. _____ Zip _____

How long at this address? (Months/Years) _____

Phone: _____

Previous Address _____ City _____ Co. _____ St. _____ Zip _____

How long at this address? (Months/Years) _____

SIGNATURE _____ DATE _____

Thank You for volunteering at The Kirk!