

# Applicant Consent

## Background Verification and Screening

The information contained in this application is correct to the best of my knowledge. **The Church will not share any information received as a result of this background check with any other agencies, or companies, unless subpoenaed by a court of law.**

I understand and accept that The Church will verify all or part of this information. I understand that this verification may include inquiry into my credit history, motor vehicle driving record, all criminal and civil records, prior employment (including contacting prior employers), education (degree, GPA and attendance) as well as any and all other county, state, or national public record information. I authorize the release of such information as may be necessary to verify the information I have provided.

I release and hold harmless from all liability any individual or entity requesting or supplying information with respect to my position. I understand that it is possible that a position may be determined in whole or in part by a prospective employer using data from a report supplied by a background check/screening service.

Should employment result from this process, I understand that I will be required to provide documentation to establish identity and employment eligibility. I understand that just as I am free to resign an offered position at any time, NorthRidge Church reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of NorthRidge Church or NorthRidge Ministries, Inc. has the authority to make any assurances to the contrary. Furthermore, I agree to abide by the ministry guidelines, Church covenants and other requirements of NorthRidge Church.

Applicant Printed Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# Application

Please fill out this application in its entirety. Thank you!

Applicant Legal Name	Last	First	M.I.
<i>Please provide any other name that is different from above that you have been known by</i>	Last	First	M.I.
Current Home Address	Street	City	State      Zip
Are you prevented from lawfully becoming employed in this country because of VISA or immigration status?	Are you 18 years or older?		Date of Birth ____/____/____ <small>(For background check only, will not be used for employment qualification)</small>
<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Phone Number	Social Security #		
<input type="checkbox"/> Cell <input type="checkbox"/> Home			
Name as it appears on Driver's License	Email Address		
Driver's License #	State in which Driver's License was issued		

## Position Desired

Position	Available Start Date
Are you currently employed?	Are you aware of any physical limitation that may interfere with you completing the duties required for this position?
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No    If yes, please explain _____

## General

Subjects of Special Study or Research Work		
Special Skills		
Activities (Civic, Athletic, Etc.)		
PLEASE EXCLUDE ORGANIZATIONS, THE NAME OF WHICH INDICATES RACE, CREED, SEX, AGE, MARITAL STATUS, COLOR OR NATION OF ORIGIN OF ITS MEMBERS.		
U.S. Military or Naval Service	Rank	Present Membership in National Guard or Reserves

## References

Reference	Phone	Relationship
Reference	Phone	Relationship
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