

**Allegheny West Conference of Seventh-day Adventists  
BACKGROUND INVESTIGATION CONSENT**

I, \_\_\_\_\_ (applicant complete name),  
hereby authorize The Allegheny West Conference of Seventh-day Adventists and  
\_\_\_\_\_ (local organization) and/or its agents to make  
an independent investigation of my criminal background, registered sex offender or police  
records, including those maintained by both public and private organizations and all public  
records for the purpose of confirming the information contained on my application and/or  
obtaining other information, which may be material to my qualifications for employment now,  
and if applicable, during the tenure of my employment/volunteer work with the above  
organization.

I release Allegheny West Conference of Seventh-day Adventists and/or its agents and any person  
or entity, which provides information pursuant to this authorization, from any and all liabilities,  
claims, or law suits in regards to the information obtained from any and all of the above  
referenced sources used.

The following is my true and complete legal name, and all information is true and correct to the  
best of my knowledge:

\_\_\_\_\_ **Full name (printed)** \_\_\_\_\_ **(male/female)**

\_\_\_\_\_ **Maiden name or other names used**

\_\_\_\_\_ **Present Street Address** \_\_\_\_\_ **How long?**

\_\_\_\_\_ **City / State** \_\_\_\_\_ **Zip**

\_\_\_\_\_ **Date of Birth** \_\_\_\_\_ **SS Number** \_\_\_\_\_ **Volunteer** \_\_\_\_\_ **Employee**

**Is there any reason you should NOT work with/around children or youth?** \_\_\_\_\_  
**If yes, please provide details** \_\_\_\_\_

**Have you ever been convicted of or pleaded guilty to a criminal offense?** \_\_\_\_\_  
**If yes, please provide details** \_\_\_\_\_

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

\_\_\_\_\_ **Name of church official to receive results**