

National Association of Congregational Christian Churches



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Release Form for Background Check For Church Staff

I, the undersigned, do hereby consent and agree that on behalf of its member churches the NACCC, through its designated agent Intellicorp Records, Inc., have the right to perform a Criminal Background Check, Social Security Verification, Nationwide Sex Offender Registry Search, Terrorist Search and pre-employment check. I authorize verification of all information in my employment application from all sources of employment, education, motor vehicle, criminal history, personal character, and worker's compensation records in accordance with ADA, labor and wage records, etc. or any part thereof, 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 and I release all persons from liability as a result of such disclosures. Information appearing on this Authorization will be used exclusively by IntelliCorp Records, Inc. for identification purposes and for the release of information which will be considered in determining any suitability for employment. I certify that I have made true, correct, and complete answers and statements on my employment, or volunteer form, any supplements to it, and in any interview in the knowledge that they will be relied upon in considering my application for such employment or volunteer work. I agree to provide additional information that may be requested to process my employment application or volunteer form. I authorize without reservation, any party or agency contacted by IntelliCorp Records, Inc. to furnish the above-mentioned information. This authorization is valid during the course of my employment or volunteer time to the extent permitted by law.

Background Check Requested by: _____

PLEASE PRINT LEGIBLY

I hereby do ___do not___authorize you to contact my current employer/church for Employment and Reference Verifications

I hereby do___ do not___authorize you to perform a background check using Intellicorp Records, Inc.

I also understand that NACCC is not responsible for any liability incurred as a result of my participation in this background search, including loss of job opportunity based on search results.

I represent that I am at least 18 years of age, have read and understand the foregoing statement, and am competent to execute this agreement.

Legal First Name: _____ Middle Name: _____ Last Name: _____

Current Address (incl. street, apt.#, city, state, zip code) : _____

Gender _____ Other names used/ Former last name: _____

Date of birth: ____ - ____ - ____

Social Security Number _____ - _____ - _____

Signature: _____ Date: _____