



Background Check Informed Consent

King of Kings Lutheran Church
1583 Radio Drive
Woodbury, Minnesota 55125
(651) 738-3110

Because the position for which you are applying will require you to provide care, treatment, education, training, instruction, or recreation to children, King of Kings Lutheran Church requests the Bureau of Criminal Apprehension (BCA) to perform a criminal background check on you under Minnesota Statutes Chapter 299C.62-299C.64.

Please complete the following information:

FULL NAME: First Name: _____

(Please Print) Middle Name: _____

Last Name: _____

Date of Birth ____ / ____ / ____

Maiden, Alias or Former: _____

Have you been convicted of any felony level crimes? Yes No

If yes, please attach a description of the crime and the particulars of the conviction.

As a subject of a background check, your rights include:

- To be informed that King of Kings Lutheran Church will request a background check before becoming or continuing as an employee or volunteer.
- To be informed of the background results and obtain a copy of the report from King of Kings Lutheran Church.
- To challenge the accuracy and completeness of any information contained in the report.
- To be informed whether King of Kings Lutheran Church has denied your application because of the background check results.

I hereby authorize King of Kings to obtain a criminal background check on my behalf and confirm that the information provided above is accurate and complete. I understand that all results will remain confidential. I understand that any omission or falsification may be grounds for rejection/denial of my application and that further steps may be required of me depending on my results.

Signature

Date

This release is valid for one year from the date of my signature

(June 2011)