

FIRST UNITED METHODIST CHURCH OF CORVALLIS

1165 NW Monroe Ave.
Corvallis, OR 97330
541.752.2491

Volunteer/Employee Declaration and Background Check

Name: _____

Last, First, Middle

Maiden (if any) _____

Address: _____

City/State/Zip: _____

E-mail: _____

Home Phone: _____ Cell Phone: _____

Date of Birth: _____ Place of Birth: _____

I have entered my social security number at the bottom of this page.

States lived in during the past five years: _____

Volunteer/employee position you are seeking: _____

I accept my responsibility to care for the children, youth, and vulnerable adults with whom I come in contact. I confirm that there is no reason whatsoever why I should not have access, unsupervised or otherwise, to children, youth, or vulnerable adults while serving as a volunteer/employee for the First United Methodist Church of Corvallis's youth programs and activities. I have declared all my previous criminal convictions to this organization if such exist. There are no criminal convictions, civil findings or injunctions relevant to this application. I am under no current criminal investigations. I grant permission for the First United Methodist Church of Corvallis to investigate my suitability to serve as a volunteer/employee of the youth programs, by conducting criminal background checks.

Signature: _____ Date: _____

If a background check has been completed for you in the last 2 years, please provide proof or contact information:

Name & Address of Organization that requested the background check and date of last check.

Name & Phone Number of reference in above organization.

For your security, you are to send this form directly to the person currently in charge of background checks:

Jim Swinyard
2998 NW Garryanna Drive
Corvallis, OR 97330

INFORMATION IS CONFIDENTIAL AND WILL NOT BE SHARED

This S.S. number portion will be destroyed after the background check is completed.

Social Security #: _____ - _____ - _____