



2141 5th Street
Cuyahoga Falls, Ohio 44221
Rev. Paul Frerichs, Senior Pastor
Alicia Galewood, Principal
330.923.1445
Fax 330.923.4517

Redeemer Lutheran Church and Christian School Background Check Authorization

Please choose one.

☐ Church Member ☐ School Association Student associated with & grade _____

Print Name: _____
(First) (Middle) (Last)

Former Name(s) and Dates Used: _____

Current Address: _____
(Mo and Yr) (Street) (City) (State/Zip)

Previous Address: _____
(Mo and Yr) (Street) (City) (State/Zip)

Email Address: _____ Phone Number: _____

Social Security Number: _____ Date of Birth: _____ Gender: M F

Driver's License Number/State: _____

Ethnicity (circle one): White Black/African American Hispanic
Asian/Pacific Islander Alaskan Native/American Indian Other

The information contained in this authorization is correct to the best of my knowledge. I hereby authorize **Redeemer Lutheran Church** and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigate consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report/ investigate consumer report may include, but is not limited to, the following areas: verification of social security number; current and previous residences; employment history; education background; character references; drug testing; civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records and any other public records.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me, to **Redeemer Lutheran Church** or its agents. I further authorize the complete release of any records or date pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or date received from other sources.

I hereby release **Redeemer Lutheran Church**, the Social Security Administration, and its agents, officials, representatives, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may, at any time, result to me, my heirs, family, or associates because of compliance with this authorization and request to release.

Signature: _____ Date: _____

Please return the completed form with a copy of a valid driver's license or State ID

Redeemer Lutheran Church and Christian School is a Christ-centered community of believers who are called to serve with love so that all may know Jesus.