

**First Baptist Church  
414 North Main Street  
Cleburne, TX 76033  
(817) 645-6684**

**AUTHORIZATION FOR CRIMINAL RECORD SEARCH**

I hereby authorize any person/firm making inquiry on behalf of **First Baptist Church** to obtain any information from police departments, other criminal justice agencies, and/or secure on-line criminal records search providers. **This information may include, but not limited to arrest and conviction records.** I hereby release such information upon request, whether favorable or unfavorable, to any representative of the above named institution. In order to assist in the compilation of this information, I hereby give the following information:

FULL LEGAL NAME: \_\_\_\_\_  
(First) (Middle) (Last)

MAIDEN NAME \_\_\_\_\_ ALIASES, IF ANY \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_

DRIVERS LICENSE NUMBER \_\_\_\_\_ STATE \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ COUNTY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

List all addresses for the past (7) years:

1. STREET \_\_\_\_\_

CITY \_\_\_\_\_ COUNTY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

2. STREET \_\_\_\_\_

CITY \_\_\_\_\_ COUNTY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

3. STREET \_\_\_\_\_

CITY \_\_\_\_\_ COUNTY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

I hereby release any individual from any and all liability for damages, of whatever kind or nature, which may at any time result to me on account of compliance, or any attempts to comply with this authorization.

This Authorization Statement is signed on:

\_\_\_\_\_ Date

\_\_\_\_\_ Employee/Applicant/Volunteer Signature

\_\_\_\_\_ Printed Name

\_\_\_\_\_  
Signature of Church's Representative

\_\_\_\_\_  
Date

(Use back of page for additional information)