

ACT Now! Youth Fellowship

Applying
Christ's
Touch



October 14, 2017

TO: ALL Adults Participating

BACKGROUND CHECKS

To All:

On behalf of the entire ACT Now! Youth Fellowship, I would like to thank you for your continued support and participation. Everyone is excited about the upcoming trip and your involvement as an adult leader or co-leader. As you can imagine, the planning, fundraising and details of the trip seem at times, to be endless.

Part of the ongoing commitment to "Safe Sanctuary" and the safety of all participants; we must perform criminal background checks for all participants over the age of 18. We do this every 3rd year. Our records indicate that it is time to perform this background check on you! Don't be alarmed or feel singled out! We ALL must have this done and a record of such on file.

Please note that we do not get a copy of the actual report, we just get notified "pass/fail" of the criteria. If the notice comes back "fail", we will contact you and you can get a complete copy from the agency performing the check. If it comes back "pass" we will keep it on file! All results will be kept strictly confidential!

Please fill out the attached form, SIGN IT and fax or email it to me ASAP.

The cost for this background check is approximately \$45.00, ACT Now! will pay for this. If you feel moved to cover the costs, please do so by submitting a donation via check to ACT Now! Youth Fellowship. Thank you for your prompt attention. If you have any comments or questions, please call me on my cell phone (908) 872-2191

Sincerely,

ACT Now! Youth Fellowship

John Jay Crandall, CEO

**As it pertains to the Deductible giving amount, no goods or services were provided in return for these contributions. ACT Now! Youth Fellowship is a New Jersey registered not-for-profit corporation.*

APPLICANT INFORMATION (Please Print)

Account Number: 101-104313

Applicant Name: (First Middle Last)	Current Address: (street address)
Other Name(s) Used: (like Maiden)	City: _____ State: _____ Zip: _____
Gender: * <input type="checkbox"/> Male <input type="checkbox"/> Female	Former Address: (1)
Social Security No:*	City: _____ State: _____ Zip: _____
Driver's License No.: _____ State: _____	Former Address: (2)
Date of Birth: * _____ Place of Birth: (City, State, Country)	City: _____ State: _____ Zip: _____

* This information will be used for purposes of background screening only and will not be used in making any employment decisions.

DISCLOSURE AND AUTHORIZATION

NOTICE REGARDING BACKGROUND INVESTIGATION

Employer ("the Company") may obtain information about you from a consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates, including motor vehicle record (or "driving record") checks, workers compensation records, credit bureau files, employment references, personal references, drug screening, any educational and licensing institution or military branch and to receive any criminal record information pertaining to you which may be in the files of any Federal, State or Local criminal justice agency in Georgia or any other State. These reports may be obtained at any time after receipt of your authorization and, if you are hired, throughout your employment. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history conducted by InfoMart, 1582 Terrell Mill Road, Marietta, GA 30067, 800-800-3774 or another outside organization. The scope of this notice and authorization is all-encompassing, however, allowing Employer to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and, if you are hired, throughout the course of your employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

New York and Maine applicants or employees only: You have the right to inspect and receive a copy of any investigative consumer report requested by Employer by contacting the consumer reporting agency identified above directly.

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" at any time after receipt of this authorization and, if I am hired, throughout my employment. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by [the consumer reporting agency], another outside organization acting on behalf of Employer, and/or Employer itself. I agree that a facsimile ("fax") or photographic copy of this Authorization shall be as valid as the original.

New York applicants or employees only: By signing below, you also acknowledge receipt of Article 23-A of the New York Correction Law.

Minnesota and Oklahoma applicants or employees only: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

California applicants or employees only: By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report if one is obtained by the Company at no charge whenever you have a right to receive such a copy under California law.

APPLICANT:

Signature: _____

Date: ____ / ____ / ____

Print Name: _____



Fax to (770) 984-8997