St John ELCA Lutheran Church
915 Federal
Saginaw, MI 48607
989 754 0489

Criminal Conviction History Consent Form

As a current or prospective employee of St John ELCA, I understand that it is St John ELCA's responsibility to secure criminal conviction history information as part of our screening process using the information provided below. I also understand that for as long as I work or volunteer at St John ELCA, periodic or annual checks may be done at the discretion of St John ELCA.

Name: _____
Last First Middle

Address: _____
Street City, State Zip

Maiden or former names previously used: _____

Birthdate: ____ / ____ / ____ Race: _____ Sex: M F

Social Security Number: _____ - _____ - _____

I understand that the background search agencies utilized by the church require the above information. I authorize St John ELCA church to utilitize the above information for the sole purpose of obtaining a file search of criminal conviction history.

Date _____

Applicant's Signature _____