

Harvest Worship Center

Background Consent Form

All volunteer and compensated workers to children are to be screened by a background check for the purpose of obtaining information regarding criminal history or abuse findings. This check includes the state sex offender's registry.

Any adult member of the congregation, volunteer, or compensated worker who has been convicted of a crime against a child or a violent crime against another adult may not provide service in any Church-sponsored activity or program for children or special-needs persons.

Those who have been convicted of either sexual or physical abuse can be forgiven for and cleansed of their sin. However, sin does have consequences, and while such persons may serve in certain other areas of ministry, they will be prohibited from serving in the children's and special-needs ministries in Harvest Worship Center.

Please know that the intent of the background check is to protect the children in our church... period. Its purpose is not to cause you personal embarrassment by dredging up past mistakes or wrong choices. Regrettably, it's impossible to implement a viable screening plan without a bit of scrutiny into some personal background information.

This application and the results shall be kept confidential by the authorized staff of Harvest Worship Center unless it is required to be released for legal reasons.

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I, _____ (applicant's complete name), hereby authorize Harvest Worship Center (Church of God of Prophecy) and/or its agents to make an independent investigation of my background, references, character, past employment, education, criminal, or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my application and/or obtaining other information, which may be material to my qualifications as a volunteer or for employment now, and if applicable, during the tenure of my volunteering or employment with Harvest Worship Center (Church of God of Prophecy).

I release Harvest Worship Center (Church of God of Prophecy) and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims, or lawsuits in regards to the information obtained from any and all of the above referenced sources used.

The following is my true and complete legal name, and all information is true and correct to the best of my knowledge.

Last Name _____ **First** _____ **Middle** _____

Other Names/Alias _____

Social Security #: _____ Date of Birth: _____

Driver's License #: _____ State of Drivers License: _____

Present Address: _____ Phone: _____

City/State/Zip: _____

Signature

Date