



**Background Check Release Form**

*Customer: Denton Baptist Association*

**APPLICATION INFORMATION**

Applicant Full Name \_\_\_\_\_

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

SS # \_\_\_\_\_ Date of Birth \_\_\_\_\_ D.L.#: \_\_\_\_\_ State Issued: \_\_\_\_\_

I hereby authorize Denton Baptist Association, and or Trak-1, Inc. to request and receive any and all background information about or concerning me, including but limited to my Criminal History, Credit History including a consumer report under the Fair Credit Reporting Act, 15 U.S.C 1681, Driving Record, Employment History, Military Background, Civil Listings, Educational Background, Professional License from any Individual, Corporation, Partnership, Law Enforcement Agency, and other entities including ray Present and Past Employers,

I further release and discharge Denton Baptist Association and their agent Trak-1, Inc. and all of their Subsidiaries, Affiliates, Officers, Employees, Contract Personnel, or Associates, from any and all claims and liability arising out of any request for information or records pursuant to this authorization, procurement of an investigative consumer report and understand that it may contain information about my character, general reputation, personal characteristics, and mode of living, whichever are applicable.

I understand that I have the right to make written request within a reasonable period of time to Trak-1, Inc. for additional information concerning the nature and scope of investigation. I acknowledge that I have voluntarily provided the above information for employment purposes, and I have carefully read and understand this authorization.

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Please Indicate Service Requested**

\_\_\_\_\_ **National Criminal/Sexual Offender**

\_\_\_\_\_ **National Criminal/Sexual Offender, Social Security Trace**

\_\_\_\_\_ **National Criminal/Sexual Offender, Social Security Trace, Credit Report, Employment Verification, Education Credentials Verification**

6060 Richmond Ste. 170 Houston, TX 77057 Tel 713.782.5999 /S00.600.S999 Fax 713.732.6402 / 888.743.7668

Name of Church Submitting \_\_\_\_\_