

Criminal History Record Information Request

(All information requested is required to obtain the background screen. This application and screening records will be held in confidential locked document storage.)

PLEASE PRINT

Ministry Requesting:			
Full name (include maiden name):			
Address:			
City	State	Zip:	
Date of Birth:		(MM/DD/YYYY)	
Social Security Number:	Contact ı	Contact number:	
Signature:	Date:		

I hereby give permission to First Baptist Church of Norman, Oklahoma to perform a criminal background screen including sexual harassment and sexual predatory records using the above information. I understand the results could eliminate me from participation in any FBC, Norman sponsored events.