Background Check Disclosure

As part of the background check process, the Alaska Synod of the Evangelical Lutheran Church in America, will obtain a report, which I understand may include information regarding my character, general reputation, personal characteristics, or mode of living.

Authorization

I hereby authorize First Advantage, on behalf of the Alaska Synod of the Evangelical Lutheran Church in America, to procure a report, which I understand may include information regarding my character, general reputation, personal characteristics, or mode of living. This report may be compiled with information from credit bureaus, court record repositories, departments of motor vehicles, educational institutions, governmental occupational licensing or registration entities, business or personal references, and any other source required to verify information that I have voluntarily supplied. I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification; to the extent such investigation includes information bearing on my character, general reputation, personal characteristics, or mode of living.

*** Signature** _____ *** Date** _____

_____

*** First name** **Middle name** *** Last name**

_____ _____

Maiden name (*if applicable*) **Previous names (*if applicable*)**

_____ **Male** ☐ **Female** ☐

*** Date of birth**

_____ _____

*** Social Security number** **Phone number**

_____

*** Email address**

_____ _____

*** Physical street address** *** City, state, and zip code**

_____ _____

Mailing address *(if different than above)* **City, state, and zip code *(if different than above)***

**** Required information***

If you would like a copy of the report mailed to you, please initial here. _____

Office of the Alaska Synod
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