Permission to Obtain a Background Check

*(This form authorizes the **Treasure Valley Southern Baptist Association** to obtain background information and must be completed by the applicant. The Treasure Valley Southern Baptist Association will keep this completed form on file in a secured location for at least five years after requesting a background check.)*

I, the undersigned applicant (also known as "consumer"), authorize the **TREASURE VALLEY SOUTHERN BAPTIST ASSOCIATION, PO Box 739, Nampa, ID 83647**, through its independent contractor, to procure background information (also known as a "consumer report and/or investigative consumer report") about me. This report may include my driving history, including any traffic citations; a social security number verification; present and former addresses; criminal and civil history/records; and the state sex offender records.

I understand that I am entitled to a complete copy of any background information report of which I am the subject upon my request to the Treasure Valley Southern Baptist Association, if such is made within a reasonable time from the date it was produced. I also understand that I may receive a written summary of my rights under the Fair Credit Reporting Act.

Signature: _____ Date: _____

Identifying Information for Background Information Agency (also known as "Consumer Reporting Agency")

Print Name: _____
First Middle Last

Other Names Used (alias, maiden, nickname): _____

Current Address: _____
Street/PO Box City State Zip Dates

Former Address: _____
Street/PO Box City State Zip Dates

Social Security Number: _____ Daytime Telephone Number: _____

Driver's License Number: _____ Date of Issuance: _____ State: _____

Date of Birth: (mm/dd/yyyy) _____ Gender: _____