

APPENDIX C - Authorization and Request for Criminal Records Check

I, _____, hereby authorize Ebensburg United Methodist Church to request the Pennsylvania State Police to release information regarding any record of charges or convictions contained in its files, or in any criminal file maintained on me, whether said file is a local, state, pr national file, and including but not limited to accusations and convictions for crimes committed against minors, to the fullest extent permitted by state and federal law. I do release said agency from all liability that may result from any such disclosure made in response to this request.

Signature of Applicant Date

Print applicant's full name: _____

Print all other names that have been used by applicant (if any):

Date of Birth: _____ Place of Birth: _____

Social Security Number: _____ - _____ - _____

Driver's License Number: _____ Issuing State: _____

License Expiration Date: _____

Request Sent to: _____

Name: _____

Address: _____

Phone: _____