

Woodbury Lutheran Church Background Investigation Consent

I, _____ hereby authorize Woodbury Lutheran Church to make an independent investigation of my criminal or police records for the purpose of confirming the information contained on my Application.

I release Woodbury Lutheran Church and/or its agents and any person which provides information pursuant to this authorization from any liabilities, claims, or law suits in regards to the information obtained from any of the above referenced sources.

The following is my true and complete legal name and all information is true and correct to the best of my knowledge:

Full name (printed)			
Maiden name or other names used			
Present address	City/State/Zip	How long at this address?	
Former address (If less than three years at current address)	City/State/Zip	How long at this address?	
Date of birth	Social Security #	Driver's License #	State of License

Signature _____ Date _____