## PRE-EMPLOYMENT AND CONTINUED EMPLOYMENT/VOLUNTEER DISCLOSURE <u>AUTHORIZATION AND RELEASE</u>

I understand that in connection with my application for Volunteer Work at Gospel Projects, Inc. and all businesses related to the same, their agents or employees may be performing, requesting, obtaining, or conducting a background screen on me.

I understand that Gospel Projects, Inc., may rely on any part of or all of this information in determining whether to extend or deny an offer of Volunteer duties to me.

I have read this Volunteer Disclosure and by signing below, hereby authorize Investigators (Florida Department of Law Enforcement, Santa Rosa County Sheriff's Office, or private firm) to conduct a background check as described herein in conjunction with my application for volunteer duties. I hereby release any and all Investigators, including Gospel Projects, Inc., from any and all liability related to the procurement or disclosure of any information provided by me or obtained about me in connection with my Application. I further direct and authorize Investigators to conduct the background screen and further authorize any third parties who may be the custodians of or in possession of the requested Information, to disclose such Information to Investigators in connection with this background check.

Applicant Signature	Date	
Printed Name	Social Security Number	
Date of Birth and State or Country	Former Last Name(s) if applicable	
Phone #	E-mail address	
Driver's License #	State of DL Issuance:	
Eye Color: Hair Color:	Height:	Weight:
Current Address:		
Street	City S	State Zip
Former Address if applicable:		
Street	City S	State Zip
Please check which age group your are seeking mentoring:		
Age 3 <sup>1/2</sup> - 4 Age 5 Age 6 Age 7   11 Age 12 Age 13 Age 14   Girls League: Boys League		Age 10 Age
List three references (employer, supervisor, pastor, co	nmanding officer, neighb	por) with phone numbers: