

Cleburne Bible Church
Volunteer Background Investigation Release Form

In order to provide a secure environment for those to whom we provide services, our staff and volunteers, and our community, Cleburne Bible Church routinely procures background investigations on volunteers. Please understand that this policy helps us ensure that our services are delivered in a professional and safe manner.

By signing below, you grant permission to Cleburne Bible Church to obtain such a report now or at any point in the future in connection with your volunteer position. You also grant permission to all parties to release information regarding your character, previous or current military service, or criminal or civil litigation matters to Cleburne Bible Church or to Imperative Information Group, Inc., including information that may be deemed negative.

Signature _____

Date _____

Identity Information

First Name:

Middle Name:

Last Name:

Current Home Address:

City: State: ZIP:

Other Names Used:
(maiden names or aliases)

Social Security Number: - -

Drivers License State: Number:

Date of Birth: Month: Day: Year:

Please list each city/county and state in which you have lived, worked, or attended school during the last ten years. Use a second form if necessary to provide full disclosure.

City: OR County: State:

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City: OR County: State:

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