

NORTH GEORGIA BOARD OF ORDAINED MINISTRY

APPLICATION AUTHORIZATION AND CONSENT FOR RELEASE AND DISCLOSURE

We welcome your application for membership with the North Georgia Conference of The United Methodist Church. We are proud of our success and recognize it is due to the quality and caliber of the clergy of our conference. In pursuit of that excellence we require, as a condition of membership, that all applicants consent to and authorize a verification of the background information submitted on their application and resumes.

This release and authorization acknowledges that the North Georgia Conference of The United Methodist Church, and Creative Human Resource Management, a consumer reporting agency, may conduct and review a verification of your education, previous employment/work history, contact personal references, access motor vehicle records, and receive any criminal history record pertaining to you which may be in the files of any federal, state, county or local criminal justice agency in any State and/or other information deemed necessary. The information received may be collected from , but is not limited to the aforementioned agencies.

NOTE: The following information is provided voluntarily and providing this information does not indicate that you are, or will be, accepted for candidacy for membership in the North Georgia Conference of The United Methodist Church. The information provided is used for identification purposes and the results of this verification process will be used to determine membership eligibility. Please print clearly all information required.

APPLICANT'S STATEMENT OF AUTHORIZATION AND CONSENT

I authorize Creative Human Resource Management of Marietta, Georgia (referred to as "CHRM") and any of its agents/designated representatives to disclose orally, electronically, and in writing the results of this verification process and/or interview to the designated authorized representatives of the North Georgia Conference Board of Ordained Ministry.

I do hereby forever release and discharge North Georgia Conference, its agents, CHRM and its associates to the full extent permitted by the law from damages, losses, liabilities, costs and expenses, or any other charge or complaint filed with any agency arising from the retrieving and reporting of information.

I hereby certify that all of the statements and answers set forth on the application form and/or my resume are true and complete to the best of my knowledge. I understand that if subsequent to membership any such statements and/or answers are found false or that information has been omitted, such false information or omissions will be considered as cause for possible dismissal.

Date

Signature