



## Request for Background Check

I hereby request **West Virginia South District** to release any information which pertains to any record of convictions in its files or in any criminal file maintained on me whether local, state, or national. I hereby release the stated agency from any and all liability resulting from such disclosure.

Church Name: \_\_\_\_\_

Name: \_\_\_\_\_

Maiden Name (if applicable): \_\_\_\_\_

Current Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of birth: \_\_\_\_\_

SSN (needed only if Driver's license is unavailable): \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

**By signing my name and date below, I am stating that all information entered above is true and accurate.**

**Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_