

Authorization for Criminal Records Check

For ages 18 and older, if younger see affidavit.

I hereby authorize the Detroit Annual Conference of the United Methodist Church and its agencies to request the National Sex Offender Registry, the State of Michigan, or any other agency to release information regarding any record or convictions contained in its files, or any criminal file maintained on me, whether said file is a local, state, or national file, and including but not limited to accusations and convictions for crimes committed against minors, to the fullest extent permitted by state and federal law. I do release the Detroit Annual Conference, all local, state, and national law enforcement agencies or other agencies from all liabilities that may result from any such disclosure made in response to this request. *(The following information is required for the background check.)*

Signature of applicant: _____ Date: _____

Print applicant's full name (first, middle, and last) _____

Date of birth (mm/dd/yy) _____ Place of birth _____

Social Security number _____ Sex _____ Race _____

Camp Name: _____ Dean/Director: _____

List all addresses (including college & home) where you have lived in the last 15 years **or** since the age of 18, whichever is less. Include dates for each address. Use additional paper if necessary.

1. Street address, incl. apartment number _____

City, State _____ Dates _____

2. Street address, incl. apartment number _____

City, State _____ Dates _____

3. Street address, incl. apartment number _____

City, State _____ Dates _____

4. Street address, incl. apartment number _____

City, State _____ Dates _____

5. Street address, incl. apartment number _____

City, State _____ Dates _____

6. Street address, incl. apartment number _____

City, State _____ Dates _____

Please complete both sides and mail to:

**Outdoor and Retreat Ministries
1309 N Ballenger Hwy, Suite 1,
Flint, MI 48504**

