

DISCLOSURE and AUTHORIZATION – BACKGROUND INVESTIGATION

In connection with my application for employment or to serve as a volunteer with **St. John's Lutheran Church and Schools** ("Client"), I understand that a "consumer report" and/or "investigative consumer report", as defined by the Fair Credit Reporting Act, will be requested by Client for employment or volunteer purposes, whichever is applicable, from Protect My Ministry, Inc., ("Protect My Ministry"), a consumer reporting agency as defined by the Fair Credit Reporting Act. These reports may include information as to my character, general reputation, personal characteristics or mode of living, whichever are applicable. They may involve interviews with sources such as my neighbors, friends or associates. The report may also contain information about me relating to my criminal history, , driving and/or motor vehicle records, social security number verification, verification of education or employment history, or other background checks. Such reports may be obtained at any time after receipt of this Disclosure and Authorization and if I am hired or serve as a volunteer, whichever is applicable, throughout the course of my employment or volunteer service, as permitted by law and unless revoked by me in writing. I understand that I have the right, upon written request made within a reasonable amount time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report to Protect My Ministry, Inc., 14499 N. Dale Mabry Hwy., Suite 201 South, Tampa, FL 33618 or 1-800-319-5581. For information about Protect My Ministry's privacy practices, see www.protectmyministry.com.

Acknowledgement and Authorization

By signing below, I voluntarily and knowingly authorize Client or its authorized agents to obtain or prepare consumer reports or investigative consumer reports about me. I acknowledge receipt of a copy of *A Summary of Your Rights under the Fair Credit Reporting Act* and certify that I have read this Disclosure and Authorization as well as the summary explaining my rights under the Fair Credit Reporting Act

Residents of Minnesota and Oklahoma only:

Under state law you have a right to receive a copy of your consumer report, free of charge, if one is required by Client. By checking the below box, a copy will be provided to you at the address you provide on this Disclosure and Authorization.

- I wish to receive a copy of any consumer report on me that is requested.

Residents of New York only:

Under state law you have the right to inspect and receive a copy of any investigative consumer report requested by Client by contacting Protect My Ministry directly. You also acknowledge receipt of a copy of Article 23-A of the New York Correction Law by checking the below box.

- I acknowledge receipt of a copy of Article 23-A of the New York Correction Law.

Residents of Washington State only:

Under state law you have a right to request a copy of the Washington Fair Credit Reporting Act's disclosure to consumers (RCW 19.182.070) and a copy of your report by contacting Protect My Ministry directly.

Residents of California and Maine only:

By signing below, you acknowledge receipt of *NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW*. Under state law you have a right to receive a copy of your investigative consumer report and/or consumer credit report, free of charge, if one is requested by Client. By checking the box below a copy of your report will be provided to you at the address you provide on this Disclosure and Authorization.

I wish to receive a copy of any report on me that is requested.

Signature

TODAY'S DATE _____

LAST NAME _____ FIRST NAME _____ MIDDLE NAME/INITIAL _____

HOME ADDRESS _____

CITY _____ COUNTY _____ STATE _____ ZIP _____

SSN

D/L or STATE ID

STATE ISSUED

EMAIL ADDRESS

For identification purposes only, please provide FULL DOB: _____

Please List Other Names Used _____

Protect My Ministry, Inc.
14499 Dale Mabry Hwy, Ste 201 South
Tampa, FL 33618
Phone: 800-319-5581 Fax: 800-319-5582
www.protectmyministry.com

NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW

St. John's Lutheran Church and Schools (the "Company") intends to obtain information about you for "employment purposes" from an investigative consumer reporting agency. Thus, you can expect to be the subject of "investigative consumer reports" and "consumer reports" obtained for "employment purposes." Such reports may include information about your character, general reputation, personal characteristics and mode of living. With respect to any investigative consumer report from an investigative consumer reporting agency ("ICRA"), the Company may investigate the information contained in your application and other background information about you, including but not limited to obtaining a criminal record report, verifying references, work history, your social security number, your educational achievements, licensure, and certifications, your driving record, and other information about you, and interviewing people who are knowledgeable about you. The results of this report may be used as a factor in making decisions for "employment purposes." The source of any investigative consumer report (as that term is defined under California law) will be Protect My Ministry, Inc., 14499 N. Dale Mabry Hwy., Suite 201 South, Tampa, FL 33618 or 1-800-319-5581 www.protectmyministry.com.

The Company agrees to provide you with a copy of an investigative consumer report when required to do so under California law. Under California Civil Code section 1786.22, you are entitled to find out from an ICRA what is in the ICRA's file on you with proper identification, as follows: (1) In person, by visual inspection of your file during normal business hours and on reasonable notice. You also may request a copy of the information in person. The ICRA may not charge you more than the actual copying costs for providing you with a copy of your file; (2) A summary of all information contained in the ICRA's file on you that is required to be provided by the California Civil Code will be provided to you via telephone, if you have made a written request, with proper identification, for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or charged directly to you; (3) By requesting a copy be sent to a specified addressee by certified mail. ICRA's complying with requests for certified mailings shall not be liable for disclosures to third parties caused by mishandling of mail after such mailings leave the ICRA's.

"Proper Identification" includes documents such as a valid driver's license, social security account number, military identification card, and credit cards. Only if you cannot identify yourself with such information may the ICRA require additional information concerning your employment and personal or family history in order to verify your identity.

The ICRA will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information contained in files maintained on you. This written explanation will be provided whenever a file is provided to you for visual inspection.

You may be accompanied by one other person of your choosing, who must furnish reasonable identification. An ICRA may require you to furnish a written statement granting permission to the ICRA to discuss your file in such person's presence.

Signature: _____

Date: _____

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