## Faith Christian Home Educators

## **CRIMINAL BACKGROUND CHECK**

Full Name (First, Middle, Last)			Date of Birth		
Addresses: (La	ast three years; max o	f 2 addresses)			
Month/Year	Street	City	State	Zip	

I, the above-named person, hereby consent, authorize and grant permission to Faith Christian Home Educators (FCHE), its employees, and/or its agents, to perform a thorough criminal background check on me. I have been informed and fully understand that FCHE requires that a criminal background check be performed on persons who will be placed in affiliations with FCHE. I also consent to the release of any information discovered in said background check to the requesting organization. I further understand that my placement in said organization may be canceled and/or affected due to information disclosed by this background check.

City

I hereby release FCHE from all liability arising from the performance of, or the release of information from, this background check; I understand that this release covers liability, claims and actions caused entirely or in part by any acts or failures to act by FCHE (or its officers, employees, or agents), including but not limited to negligence, mistake, or failure to supervise by FCHE. I freely agree that I am personally responsible for all risks and any and all damages arising in any manner from the performance of, or the release of information from, this background check.

- □ I wish to receive a copy of any Background Check report on me that is requested.
- □ I DO NOT wish to receive a copy of any Background Check report on me that is requested.

Signature

Month/Year

Street

Date

State

Zip

For more information, visit the Faith Christian Home Educators Website: <u>www.faithchristianhome.net</u>

Return to FCHE Registrar to complete membership in Faith Christian Home Educators.