



THE FREEDOM TO FOCUS ON YOUR FUTURE

You must print legibly and hard enough for the information to be read when faxed. No markouts please.

Name: _____ Gender Male / Female

MAIDEN NAME (If applicable) _____

CURRENT ADDRESS _____ HOW LONG? _____

CITY, STATE, ZIP: _____

1ST PREVIOUS ADDRESS _____ HOW LONG? _____

CITY, STATE, ZIP: _____

APPLICANT SOCIAL SECURITY NUMBER: _____ DATE OF BIRTH _____

DRIVER'S LICENSE # AND STATE ISSUED: _____

APPLICANT AUTHORIZATION

I hereby authorize FirstPoint, Inc. ("FirstPoint") to prepare an INSIGHT report that will include my present and previous employment information including salary as well as work performance. I also authorize FirstPoint to verify my past and present driving records, education records, credit history, and professional credentials. I further authorize FirstPoint to perform a criminal records search.

I understand that FirstPoint does not guarantee the accuracy or timeliness of the information obtained from other sources and that FirstPoint will not be liable for any inaccuracy in the information obtained from other sources that is included in the INSIGHT report.

Further, I authorize my current and former employers, as well as other organizations to provide such information to FirstPoint and I hereby release and hold harmless FirstPoint, my current and former employers, as well as other organizations who have provided information in connection with my INSIGHT report.

CONSUMER DISCLOSURE

I understand that a pre-employment consumer report (Insight) may be obtained from the FirstPoint, Inc for employment purposes.

_____/_____/_____
APPLICANT'S SIGNATURE DATE

_____/_____/_____
PARENT/GUARDIAN SIGNATURE (IF APPLICANT IS UNDER 18 YEARS OLD) DATE

California, Minnesota & Oklahoma residents only:

I want to receive a free copy of any Consumer Report, Investigative Consumer Report or Credit Report on me that is requested.

Yes No

For GA Criminal Searches Only (Must Check One): Employment w/ Mentally Disabled (Purpose Code M)
 Employment w/ Elder Care (Purpose Code N) Employment w/ Children (Purpose Code W) None Apply

Baptist State Convention of North Carolina

Criminal Records Credit Report (Persona) Motor Vehicle Record FACIS
(Healthcare Only)

SS number & Name Verification /Address search

Criminal (Where?) (1) _____ (2) _____ (3) _____

Employment (1) _____ (2) _____ (3) _____

For Baptist State Convention of North Carolina, please list account to charge _____

and name of Facility/Team or Group _____



I, _____, have applied for a job with the Baptist State Convention of North Carolina (BSCNC). I realize that prior to any offer of employment that BSCNC will do a check on any criminal, sexual misconduct, and financial background about me. (Unpaid bills and collection accounts will show up.)

I am given the following opportunity to tell and or explain to BSCNC prior to the background check of any problems that may be found. I realize that if I fail to disclose any that might be found, I may not be considered for employment. (Note: Things that one has been told are expunged from public records usually have not been!)

_____ I do not know of any problems that may be found.

_____ I voluntarily choose to disclose the following:

Signed: _____

Date: _____

For Baptist State Convention of North Carolina, please list account to charge _____
and name of Facility/Team or Group _____