THE EPISCOPAL DIOCESE OF MISSOURI

BACKGROUND CHECK APPLICATION

Please print clearly in BLOCK LETTERS

Date:_____ Organization/Congregation Requesting:_____

Position: _____ Volunteer? ☐ Yes ☐ No

YOUR CONTACT INFORMATION:

First Name: _____

Middle Name: _____

Last Name: _____

Date of Birth: _____

Gender: _____

Phone Number: _____

Email Address: _____

PLEASE NOTE: Completing and submitting this form ONLY initiates your background check application. **The background search will not move forward until you complete the online application.**

Please look for two emails from Protect My Ministry. The first email will include a link to complete the online application along with your User ID. The second email will provide your password.

You will need a laptop or desktop to complete their application. Phones and tablets do not work.
Also, please check your spam folder if you do not receive information in your inbox.

NOTICE – BACKGROUND INVESTIGATION

Employee Report: In connection with your employment with The Episcopal Diocese of Missouri (the "Company"), notice is hereby given that a consumer report and/or investigative consumer report may be obtained from a consumer reporting agency for employment purposes. These reports may contain information about your character, general reputation, personal characteristics and mode of living, whichever are applicable. They may involve personal interviews with sources such as your neighbors, friends or associates. The reports may also contain information about you relating to your criminal history (including but not limited to county/federal searches and the national criminal/sex offender combo search), credit history, driving and/or motor vehicle records, education history, employment history, or other background checks.

Volunteer Report: The report may contain information about you relating to your Social Security Number trace, criminal history (including but not limited to county/federal searches and the national criminal/sex offender combo search), and driving and/or motor vehicle records.

Both Reports: You have the right, upon written request made within a reasonable time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report prepared by contacting the Company and **Ministry Brands Holding, LLC**, 10133 Sherrill Blvd. Suite 120, Knoxville, TN 37932; Phone: 1-866-312-8334. For information about **Protect My Ministry**'s privacy practices, see www.protectmyministry.com. The scope of this notice and below authorization is not limited to the present and, if you are hired/selected, will continue throughout the course of your employment/ministry and allow the Company to conduct future screenings for retention, promotion or reassignment, as permitted by law and unless revoked by you in writing.

ACKNOWLEDGEMENT AND AUTHORIZATION

By signing below, I hereby authorize the obtaining of consumer reports and/or investigative consumer reports by the Company at any time after receipt of this authorization and throughout the course of my employment, if applicable.

IMPORTANT! YOU MUST CHECK ONE OF THE FOLLOWING:

Satisfactory to contact your current employer? ☐ Yes ☐ No ☐ Volunteer

Applicant's Signature: _____

Print Name: _____ Date: _____

Return this form by submitting it at this link:
https://form.jotform.com/DioMO/background-check-initiationform

If you are unable to submit there, you may also email or USPS to:

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