

CONSENT AND WAIVER FORM

In consideration of my role with Calvary Chapel Church, Inc., its affiliates, integrated auxiliaries and supporting organizations, hereinafter "Calvary Chapel Gwinnett" and recognizing the importance of my character being above reproach, I HEREBY CONSENT TO THE FOLLOWING:

I AUTHORIZE Calvary Chapel Gwinnett to receive any criminal history record information pertaining to me which may be in the files of any State or local criminal justice agency in Georgia or any other State.

I CONSENT to a copy of this Consent and Waiver Form being furnished to any reference that I have provided to Calvary Chapel Gwinnett and to any other person, organization or entity that Calvary Chapel Gwinnett deems necessary in connection with its investigation of my background, character or qualifications.

I HEREBY WAIVE, RELEASE AND HOLD HARMLESS FROM LIABILITY Calvary Chapel Gwinnett, its staff, employees, volunteers, and agents with regard to any decision that it makes on my application for involvement with Calvary Chapel Gwinnett based on information I provide or that is obtained through the criminal history and background screening process

By signing below I agree to immediately inform Calvary Chapel Gwinnett of any subsequent information, including any accusations, convictions or other occurrences that relate to the areas of inquiry set forth above.

PRINT NAME: Last _____ First _____ Middle _____ Maiden _____

Address _____ City _____ State _____ Zip _____

DOB _____ Sex _____ SSN _____ Drivers License # _____

Signature _____ Date _____

Please also respond to these questions and be prepared to possibly discuss with a Pastor or Elder.

1. Have you ever been found guilty (or pleaded no contest) of any crime? Y or N
2. Have you ever been accused or charged with a crime or incident involving a child, the elderly or the disabled? Y or N
3. Have you ever struggled with any sin involving a child, the elderly or disabled? Y or N
4. Have you ever been charged with a crime or misconduct at your workplace? Y or N
5. Have you ever been accused of improper conduct by an employer or as a volunteer for any reason? Y or N
6. Is there any other information that will be revealed through a background check? Y or N

If you answered Yes to any of the above questions, please provide a written explanation on a separate sheet of paper and attach to this form.

ADDITIONAL ADDRESSES
(Please Provide History for Last 7 Years Minimum)

Former Address #1	Last	First	Middle	(Maiden)	Dates From/To at this address
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Address	City	State	Zip
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Former Address #2	Last	First	Middle	(Maiden)	Dates From/To at this address
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Address	City	State	Zip
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Former Address #3	Last	First	Middle	(Maiden)	Dates From/To at this address
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Address	City	State	Zip
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Former Address #4	Last	First	Middle	(Maiden)	Dates From/To at this address
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Address	City	State	Zip
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Former Address #5	Last	First	Middle	(Maiden)	Dates From/To at this address
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Address	City	State	Zip
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Former Address #6	Last	First	Middle	(Maiden)	Dates From/To at this address
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Address	City	State	Zip
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