



The Episcopal Church in South Carolina

www.episcopalchurchsc.org

All persons wishing to be involved in ministries involving children or acting as a Eucharistic Visitor in the name of your parish or mission must submit to a background check, as well as complete the Safeguarding Online training required by TEC in SC and TEC canons.

Notification/Release of Information Form for Volunteers

The purpose of this form is to notify you that a background check will be conducted on you to allow for service in above named ministries.

Church Name: _____

Last Name: _____ First: _____ Middle: _____

Social Security Number: _____ Date of Birth: _____ Age: _____

Driver's License Number: _____ State of Issue: _____

Current Address: _____

City: _____ State: _____ Zip: _____

- Please run a Department of Motor Vehicle records report as part of this check. I am participating in an outreach ministry involving transportation/driving

In connection with this request, I authorize all law enforcement agencies, city, state, county, and federal courts, and military services to release information about my background, including, but not limited to, information about my, driving record, criminal record, and general public record history to the person or company with which this form has been filed, or their agents. This releases the aforesaid parties from any liability and responsibility for the collection of the above information.

Applicant's Signature: _____

Date: _____