



## saint andrew Lutheran church

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### AUTHORIZATION/CONSENT

During the application process and at any time during the tenure of my employment/service with St. Andrew Lutheran Church, I hereby authorize ChoicePoint Services Inc., on behalf of St. Andrew Lutheran Church to procure a consumer report (known as an investigative consumer report in California) which I understand may include information regarding my character, general reputation, or personal characteristics. This report may be compiled with information from courts record repositories, departments of motor vehicles, past or present employers and educational institutions, governmental occupational licensing or registration entities, business or personal references, and any other source required to verify information that I have voluntarily supplied. I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification, to the extent such investigation includes information bearing on my character, general reputation, or personal characteristics.

\_\_\_\_\_  
Applicant/Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Social Security Number\*

\_\_\_\_\_  
Date of Birth\*

\* For identification purposes only

Minnesota and Oklahoma Residents please note: In connection with your application for employment/service, your consumer report may be obtained and reviewed. Under Minnesota and Oklahoma law, you have a right to receive a free copy of your consumer report by checking the appropriate box below.

\_\_\_\_ YES, I am a Minnesota resident and would like a free copy of my consumer report.

\_\_\_\_ YES, I am an Oklahoma resident and would like a free copy of my consumer report.

California Residents please note: Under California law, you have a right to receive a free copy of your report by checking the appropriate box below.

\_\_\_\_ YES, I am a California resident and would like a free copy of my investigative consumer report.

Printed Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

\* Please  
attach copy of  
valid driver's  
license