

**BOARD OF ORDAINED MINISTRY
NEW MEXICO ANNUAL CONFERENCE
CONSENT TO PERFORM A HISTORY/BACKGROUND and CREDIT CHECK
IN COMPLIANCE WITH THE FCRA (FAIR CREDIT REPORTING ACT)**

Last Name First Name Middle Name or Initial

Maiden or other name(s) used in any and all other records of birth or records of residence.

* Address Apartment or #

City County State Zip

** Date of Birth Social Security Number **Gender **Race

**Drivers License Number **State of Issue

***AS SHOWN ON THE ORIGINAL APPLICATION
**TO BE USED FOR CRIMINAL HISTORY CHECKS / CREDIT REPORTS / MOTOR VEHICLE
REPORTS ONLY AND NOT A PART OF THE PERSONNEL FILE.**

I, _____, am an applicant for appointment with the New Mexico Annual Conference. As a part of the appointment process, I have been advised that the Conference conducts a criminal history check that includes a credit report and or motor vehicle report. I do hereby consent to the use of any and all information provided to the Conference in the application process to be used in the criminal history/background/credit check.

The following are my responses to questions about my criminal history (if any).

1. ___ YES ___ NO Have you ever been convicted or plead guilty before a court for any federal, state or municipal criminal offense? (exclude minor traffic misdemeanors).
If yes, please provide details below.

State: County: Date of Offense: / /

Details of conviction:

2. ___ YES ___ NO Have you ever received deferred adjudication or similar disposition for any federal, state or municipal offense?
If yes, please provide details below.

State: County: Date of Offense:

Details of offense:

3. YES NO Have you ever received probation or community supervision for any federal, state or municipal offense? If yes, please provide details below.

State: _____ County: _____ Date of Offense: _____

Details of supervision: _____

4. YES NO Have you ever been convicted of any criminal offense in a country outside the jurisdiction of the United States? If yes, please provide details below.

Country: _____ City: _____ Date of Offense: _____

Details of conviction: _____

5. YES NO As of the date of this consent form, do you have any pending charges against you? If yes, please provide details below.

State: _____ County: _____ Date of Arrest _____

Details of pending charges: _____

LIST ALL COUNTIES AND STATES OF RESIDENCE SINCE HIGH SCHOOL GRADUATION OR AGE 18

CITY/TOWN	COUNTY	STATE	YEARS LIVED
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I HEREBY CERTIFY THAT ALL INFORMATION PROVIDED IN THIS CONSENT FORM IS TRUE, CORRECT AND COMPLETE. IF ANY INFORMATION PROVES TO BE INCORRECT OR INCOMPLETE, I UNDERSTAND THAT GROUNDS FOR CANCELING OF ANY AND ALL OFFERS OF EMPLOYMENT WILL EXIST AND MAY BE USED AT THE DISCRETION OF THE ANNUAL CONFERENCE.

Signed this _____ day of _____, 20 _____

APPLICANT (PRINT NAME) _____

APPLICANT'S SIGNATURE _____