



KELMAR

A S S O C I A T E S

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BACKGROUND INQUIRY RELEASE

In connection with my application for employment, I understand that an investigative background inquiry is to be made on myself, including, but not limited to, identity and prior address (es) verification, criminal history, driving record, consumer credit history, education verification, prior employment verification and other references, as well as other information.

I, further understand that for the purposes of this background inquiry, various sources will be contacted to provide information, including but not limited to various Federal, State, County, municipal, corporate, private and other agencies, which may maintain records concerning my past activities relating to my criminal conduct, civil court litigation, driving record, and credit performance, as well as various other experiences.

I, hereby authorize without reservation any company, agency, party or other source contacted to furnish the above information as requested. I do hereby release, discharge and indemnify the prospective employer, its agents and associates to the full extent permitted by law from any claims, damages, losses, liabilities, cost and expenses arising from the retrieving and reporting of the requested information.

I am willing and acknowledge that a photocopy of this authorization be accepted with the same authority as the original and this signed release expires one (1) year after the date of origination.

PLEASE PRINT CLEARLY.

Company Name: Summit Christian Center

Company Address: 2575 Marshall Rd SATX 78259

Applicant Full Legal Name:

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Present Address: _____

City: _____ State: _____ Zip: _____

Driver's License/ID: _____ State: _____

In connection with this request, I _____ hereby release the aforesaid parties from any liability and responsibility for obtaining my credit report.

Sign: _____ Date: _____

Summit Christian Center Employment Application



Date _____

Position applied for _____

Name _____

Last

First

Middle

Address _____

Street

City

State

Zip

Telephone () _____ Work Cell Home Best time to call _____

Email Address _____

Social Security Number _____

Are you legally eligible for employment in this country? Yes No

Note: If you are hired, you will be required to produce documents about your eligibility for employment in order to complete an I-9 Form.

Employment History

Current or Last Employer

Please complete all of the following blanks about your employment history even if you do not think the questions relate to the position you seek.

Business Name _____

Address _____

Street

City

State

Zip

Telephone () _____ May we contact? Yes No

Dates of employment: From _____ To _____

Position or Title _____

Name/Title of Supervisor _____

Starting Salary _____ Ending Salary _____

Describe job duties, responsibilities and important accomplishments _____

Reason for leaving _____

Next Previous Employer

Business Name _____

Address _____

Street

City

State

Zip

Telephone () _____ May we contact? Yes No

Dates of employment: From _____ To _____

Position or Title _____

Name/Title of Supervisor _____

Starting Salary _____ Ending Salary _____

Describe job duties, responsibilities and important accomplishments _____

Reason for leaving _____

Next Previous Employer

Business Name _____

Address _____

Street

City

State

Zip

Telephone () _____ May we contact? Yes No

Dates of employment: From _____ To _____

Position or Title _____

Name/Title of Supervisor _____

Starting Salary _____ Ending Salary _____

Describe job duties, responsibilities and important accomplishments _____

Reason for leaving _____

Educational Background

	<u>Name</u>	<u>City</u>	<u>Dates Attended</u>	<u>Degree</u>
High School _____				
College _____				
Graduate _____				
Other _____				

If you are presently enrolled in a school, what are you studying? _____

List any special skills, training, or knowledge you have for this position and any other achievements you would like considered. _____

References

If possible, list three business references who are not related to you and who were not your previous supervisors. Also, one personal reference who is not related to you.

 Name Years known

 Telephone

 Address

 City State Zip

 Relationship

 Name Years known

 Telephone

 Address

 City State Zip

 Relationship

 Name Years known

 Telephone

 Address

 City State Zip

 Relationship

 Name Years known

 Telephone

 Address

 City State Zip

 Relationship

I understand that this application may be withdrawn or my employment may be terminated if I have made any misrepresentations on this form. I authorize the church to contact all references to seek job-related information about me, and I release the church and all other persons and companies from liability for furnishing or obtaining such information.

 Signature

Authorization and Release of Information

I authorize Summit Christian Center and its agents to contact any person or employers listed on my employment application to confirm information supplied by me and/or to obtain other material information about my employment. I authorize all persons and employers to release any information about my qualifications. I also release any person or employer which provides information from any and all liability for providing that information.

Signature

Print Name

Date

