



Southern Conference of the United Church of Christ
 Eastern North Carolina Association
 252-B West Fifth Street
 Burlington, NC 27215

Safe Church
 Contact: H. E. "Hunter" Thompson
 (919) 880-6431

(336) 343-4066 (Office) (336) 343-4068 (FAX)
 www.enca-ucc.org/safe
 het101@nc.rr.com or vertiepowersenca@soc-ucc.org

PART TWO (Optional)

Request for IntelliSearch Background Check

Instructions for processing your request:

1. Each applicant search is \$10. The requesting church will be billed.
2. Review your church's Safe Church policies and procedures with the applicant.
3. Have the applicant sign a confidential **Authorization to Release Information and either Exhibit A (Church Staff) or Exhibit B (Volunteers)**.
4. Complete the Request for Background Check form below.
5. Fax to the Southern Conference Eastern North Carolina Association offices at (336) 343-4068 to the attention of Rev. Vertie Powers, Conference Minister for the ENCA.
6. Supplemental verification searches are also available. Additional fees will apply.

The requesting church should keep the signed original of the **Authorization to Release Information** on file with other confidential church documents.

Date _____ Is this request urgent? Yes ___ No ___
 Church _____ Phone (____) ____--_____
 Requesting Official _____
 Billing Address _____
 City _____ State ____ Zip Code _____

Applicant's Information

Date of Birth ____/____/____ SSN# _____--_____
 Full Legal Name _____
 Address _____
 City _____ State ____ Zip Code _____
 County of Residence _____
 Phone (____) ____--____ Mobile (____) ____--_____
 Driver's License Number _____ State Issued _____

Have your Safe Church policies been reviewed with the applicant? Yes ___ No ___

Is a signed **Authorization to Release Information** on file for the applicant? Yes ___ No ___

All policies and procedures may be downloaded at the Eastern North Carolina Association web site <http://www.enca-ucc.org/safe>. If you have questions please contact H. E. "Hunter" Thompson at (919) 880-6431 or het101@nc.rr.com.



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PART TWO (Optional)

Supplemental Employment Verification (Additional Fees Apply)*

Do you want an employment verification report? Yes ___ No ___
 Current Employer _____
 Supervisor _____ Department _____
 Address _____
 City _____ State ___ Zip Code _____
 Former Employer _____
 Supervisor _____ Department _____
 Address _____
 City _____ State ___ Zip Code _____

Supplemental Education Verification (Additional Fees Apply)

Do you want an education verification report? Yes ___ No ___
 Schools _____ Dates Attended _____
 Address _____
 City _____ State ___ Zip Code _____
 Highest Degree Attained _____ Major _____

Do you want an education verification report? Yes ___ No ___
 Schools _____ Dates Attended _____
 Address _____
 City _____ State ___ Zip Code _____
 Highest Degree Attained _____ Major _____

Supplemental Personal Reference Verification (Additional Fees Apply)

Do you want a reference verification report? Yes ___ No ___
 Reference Name _____ Phone Number (____) ___--_____
 Address _____
 City _____ State ___ Zip Code _____

Do you want a reference verification report? Yes ___ No ___
 Reference Name _____ Phone Number (____) ___--_____
 Address _____
 City _____ State ___ Zip Code _____

Supplemental Address Verification (Additional Fees Apply)

Do you want a 10 year address verification report? Yes ___ No ___
 Previous Address _____
 City _____ State ___ Zip Code _____

Do you want a 10 year address verification report? Yes ___ No ___
 Previous Address _____
 City _____ State ___ Zip Code _____

*Supplemental verification reports are optional.