

Background Check

Protect My Ministry www.mobilizemyministry.com (Please print)

Signature	Date
Printed Name	
Printed Name	_
*Valid Forms of Identification: L	Orivers License, Passport, Birth Certificate)
form of identification or have	e presented my identification in person(initial).
The search will be conducted	by Protect My Ministry. I have also attached a copy of a valid
I authorize Centerville Baptis	st Church to conduct background search for volunteer purposes.
Address:	
Gender:	
D.O.B.:	
•	
Social Security:	
Last Name:	
Middle Name:	
First Name:	