

**PRESBYTERY OF LAKE ERIE  
BACKGROUND INVESTIGATION CONSENT FORM**

I, \_\_\_\_\_  
(applicant's complete name)

hereby authorize The Presbytery of Lake Erie and/or its agents to make an independent investigation of my background, references, character, past employment, education, criminal, or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my Application or Personal Information Form and/or obtaining other information, which may be material to my qualifications for employment now, and if applicable, during the tenure of my employment with

\_\_\_\_\_  
(name of church(es) or other organization)

I release The Presbytery of Lake Erie and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims, or lawsuits in regards to the information obtained from any and all of the above referenced sources used.

The following is my true and complete legal name, and all information is true and correct to the best of my knowledge.

Full Printed Name (first, middle, last, suffix) \_\_\_\_\_

Maiden Name and/or all other names used \_\_\_\_\_

\_\_\_\_\_  
Date of Birth                      Social Security #                      Driver's License #                      State of License

Present Street Address (No P.O. Box) \_\_\_\_\_

City & State \_\_\_\_\_ County \_\_\_\_\_ Zip \_\_\_\_\_ (Dates in years)

*Former street addresses since age 21 (you may use additional sheets of paper as necessary)*

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

City & State \_\_\_\_\_ County \_\_\_\_\_ Zip \_\_\_\_\_ (Dates in years)

*(Please continue and complete reverse side of page)*

Former Street Address \_\_\_\_\_  
City & State \_\_\_\_\_ County \_\_\_\_\_ Zip \_\_\_\_\_ (Dates in years)

Former Street Address \_\_\_\_\_  
City & State \_\_\_\_\_ County \_\_\_\_\_ Zip \_\_\_\_\_ (Dates in years)

Former Street Address \_\_\_\_\_  
City & State \_\_\_\_\_ County \_\_\_\_\_ Zip \_\_\_\_\_ (Dates in years)  
*(Please use additional sheets of paper as necessary)*

*Please list any currently pending criminal or sexual abuse charges against you:*

Charge \_\_\_\_\_ Jurisdiction \_\_\_\_\_

Charge \_\_\_\_\_ Jurisdiction \_\_\_\_\_

Charge \_\_\_\_\_ Jurisdiction \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date Signed \_\_\_\_\_

This form is to be returned to the General Presbyter, Rev. David S. Oyler

Rev. David S. Oyler  
Presbytery of Lake Erie  
2816 Elmwood Avenue  
Erie, PA 16508

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FAX (814) 866-0856