

 **First Assembly of God**

Screening Form for Vehicle Drivers

All Vehicle Drivers must be a Voting Member of First Assembly of God.

Please Print Legibly

Volunteer Information

Name:	First Name	Middle Name	Last Name
Birthday:	Month / Day / Year	Gender:	Social Security #:
Email:			
Driver's License #:			State:
Vision Information: Care or Net Leader:			

Current Address:	Street Address		
	City	State	Zip Code
Home #	Cell #		
Former Address City, State, Zip Code			

Background Questions - Please check the appropriate box:

_____ I have never been convicted of a crime. _____ I have been convicted of the crime(s) listed

below

***If you have had a traffic violation within the last six months, you will not be approved as a driver.**

Date and Place of Conviction Offenses & Sentencing/Fines	
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Circle Region: *Wahiawa* *East Honolulu* *Leeward* *Metro* *Red Hill* *Windward* *Hamakua*

Ministry Volunteering for: _____, _____

_____ ***I am aware that I will need to complete Driver Training at FAOG before I can operate one of their vehicles***
Initials

Screening/Background Authorization

During the application process and at any time during my tenure as a van ministry volunteer with First Assembly of God, I hereby authorize First Advantage LNS Screening Solutions, Inc. (140 Fountain Parkway, Suite 410, St. Petersburg, FL 33716), on behalf of First Assembly of God to procure a consumer report which I understand may include information regarding my character, general reputation, personal characteristics, or mode of living. This report may be compiled with information from courts record repositories, departments of motor vehicles and any other source required to verify information that I have voluntarily supplied. I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification. First Advantage LNS Screening Solutions, Inc. has trained personnel to explain any information that is furnished to you and any information that is coded. Also, I authorize First Assembly of God to obtain any other information they deem appropriate and/or necessary from any other agency/organization. I fully understand that said information will be held in high confidence and used solely for the purpose of determining my worthiness in working with children/youth for the sole purpose of protecting children/youth entrusted to the care of First Assembly of God.

During the application process and at any time during my tenure as a vehicle driver volunteer with First Assembly of God, I authorize First Assembly of God to procure a Driver's Abstract. I fully understand that said information will be held in high confidence and used solely for the purpose of determining my worthiness in driving vehicles of First Assembly of God.

Signature		Date	
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Regional Pastors Approval: _____ Member _____

Elders Approval: _____ Date: _____

 **First Assembly of God**

Screening Form for Vehicle Drivers

Driver's License copy is required with this form.

Incomplete forms will not be processed.

Regional Pastors Approval: _____ Member _____

Elders Approval: _____ Date: _____