Please list the name, date of birth, and if they have been checked or not, for all persons you wish to have a national criminal background and/or motor vehicle check. A copy of this form will be returned to the authorized contact person with the results.

Local Church Name: _		
Board/Agency:		
	South Carolina Conference, UMC Background Check Report	

	Name (Printed)	D.O.B	Had Conference Screening? (last 3 years)	Supervision Approved/Not Approved (Approvals to be comp	
(SAMPLE)	Johnny Appleseed	01-01-1945	NO	LEAVE BLANK	LEAVE BLANK