

REFERENCES: (Cont.)

Name: _____

Address: _____

Telephone: _____

Daytime Number

Other Number

Relationship to Reference: _____

BACKGROUND INFORMATION:

1. Have you ever been *convicted of or pled guilty to or currently charged with* committing a crime involving the abuse or endangerment of children? () Yes () No

If you answered "yes", please explain: _____

2. Have you ever been, or are you currently being *investigated* by a governmental agency for the abuse or endangerment of children? () Yes () No

If you answered "yes", please explain: _____

3. Have you ever been, or are you currently, involved in any illegal or unethical financial dealings? () Yes () No

If you answered "yes", please explain: _____

4. Have you ever been convicted of or pled guilty to a crime involving a drug-related charge, a crime of violence, theft or criminal negligence? () Yes () No

If you answered "yes", please explain: _____

5. Have you ever been sued for negligence with regard to caring for our supervising children? () Yes () No

If you answered "yes", please explain: _____



I hereby certify that the information I have provided on this application is true and complete. I authorize New Beginnings to verify the information I have provided on this application by contacting the references I have listed, by conducting a criminal records check, or by other means, including contacting others whom I have not listed. I authorize the references listed in this application to give New Beginnings whatever information they may have regarding my character.

In consideration of the receipt and evaluation of this application by New Beginnings, I hereby release any individual, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of compliance or any attempts to comply, with this authorization.

Should my application be accepted, I agree to abide by and be bound by the policies and the moral conduct of New Beginnings and refrain from unethical conduct while conducting New Beginnings business.

I have read this waiver and the entire application, and I am fully aware of its contents. I sign this consent freely and under no duress or coercion. I understand that any omission from or misinformation in the application may result in the rejection of my application.

Signature of Applicant

Date

Witness

Date