

## Criminal Behavior and Sexual Misconduct Declaration and Authorization for Background Check

In the spirit of concern for the safety of the Wesley community and that of the congregations and agencies who partner with us in the Practice of Ministry and Mission program, we require applicants to answer the following questions and to sign below giving Wesley permission to conduct a criminal background check. Be assured that as a seminary, we believe in repentance and renewal. Therefore we will not necessarily decline an applicant on the basis of past criminal behavior. Applicants will not be disqualified on the basis of their political actions or affiliations.

1. Have you ever b	een charged with a	a crime?	Yes	No		
2. If "Yes," were yo	u found guilty?	Yes	No			
3. Have you ever been accused of sexual misconduct or harassment with a child, youth, or adult? Yes No						
4. Have you ever been dismissed or resigned from any position, volunteer or salaried, because of an accusation of criminal or sexual misconduct on your part? Yes No						
5. If you answered "Yes" to any of these questions, please explain your understanding of the circumstances below. (Attach additional sheet of paper if needed).						
Wesley Theological S	eminary will conduc	ct a backgroi	und check for o	each applicant.		
My signature below indicates that all the information contained in my application is factually correct and honestly presented. I understand that false representation may result in denial, revocation of admission, or separation from the seminary. My signature also authorizes the seminary to complete a criminal background check.						
Signature			Date_			

Both pages must be completed, signed and returned to the Admissions Office.



Admissions ~ 4500 Massachusetts Ave., N.W., Washington, DC 20016 ~ (202) 885-8659 ~ Admissions@wesleyseminary.edu

## AUTHORIZATION TO RELEASE INFORMATION FOR BACKGROUND CHECK

Last Name	First Name		Middle Name	
Current Address (include street, city, state, zip code)			Dates Lived Here	
Addresses for the Past Seven Years: (include street, city, state, zip code)			Dates of Residence:	
Date of Birth (mm/dd/yyyy)	Other Names Used (including n	naiden name)	Years Used	
Date of Birtir (mini, da, yyyy)				
Social Security Number (xxx-xx-xxxx)	Gender:	Female	Male	
for admission. I certify that I had admissions application, on any upon in considering my application, any party or agency information.	Authorization will be used ex the release information whi ave made true, correct, and of supplements to it and in any tion for admissions to Wesle y contacted by IntelliCorp Ro	cclusively by Intel ch will be conside complete answer y interview in the ey Theological Ser ecords, Inc to fur	liCorp Records, Inc for ered in determining any suitability is and statements on my knowledge that they will be relied minary. I authorize without	
and substance of all information and the recipients of any report year period preceding my reque	n in its files on me at the tim ts on me which <b>IntelliCorp R</b> est.	ne of my request, ecords, Inc has p	including sources of information, reviously furnished within the two	
I understand and agree that any my application or any suppleme admission to Wesley Theologica	ents to it and in any interview	_	ment, or answer made by me on ent grounds for rejection of	

**Applicant Signature** 

Date

**Printed Name**