Georgia Bureau of Investigation
Georgia Crime Information Center
Consent Form

I hereby authorize the pastors of Three Point Bible Church of Jonesboro, Georgia, **Dr. Paul Cook or Sandra DeVane**, to receive any Georgia criminal history information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia.

Please Print

_____
First Name **Middle Name** **Last Name**

_____ _____ _____ _____ _____ _____
Sex **Race** **Height** **Weight** **Eye Color** **Hair Color**

_____ _____-_____-_____ _____
Date of Birth **Social Security #** **Driver's License #**

_____
Current Home Address

_____ _____ _____
City **State** **Zip Code**

(_____)_____-_____ (_____)_____-_____
Home Phone **Cell Phone**

_____ _____
Birth City **Birth State or Country**

Special Employment Provision:

Employment with children (Purpose Code "W")

_____ _____
Signature **Date**

_____ _____
Notary **Date**

Form Submitted by Pastor of Three Point Bible Church

_____
Signature of Pastor **Date**