

AUTHORIZATION FOR DISCLOSURE

I understand that ministerial leaders must commit themselves to the highest standards of personal and professional conduct. They are accountable to God, the church, and the credentialing body for the conduct of their lives and ministries. Candidates for ministry assignments must voluntarily disclose pertinent information that could affect their ministry or the congregations and institutions they serve. Therefore:

- I also authorize Lancaster Mennonite Conference to make inquiries regarding my background and character, and information I supplied.

- I authorize all persons, organizations, present and former employers, committees on ministry, courts, law enforcement authorities, public authorities and the agents of any of them to respond to inquiries concerning me and to verify information I provided. They may comment on and state opinion regarding my background and character. In consideration for my being considered as a potential candidate for ministerial leadership, and intending to be legally bound, I release all of them, as well as Lancaster Mennonite Conference and all who act on its behalf, from all liability, damages and causes of action arising from or relating to their responses made in good faith.

Dated: _____

Signed: _____

District: _____

Printed: _____

Address: _____

Telephone: (____) _____

For Office Use:

Credentialing\Authorization for Disclosure.wpd

Criminal Check sent:	Ch. Abuse Hist. sent:	Received Clearance Cert.:
----------------------	-----------------------	---------------------------