



Permission to Obtain a Background Check

(This form authorizes the Cutting Edge Ministries to obtain background information and must be completed by the applicant. We must keep this completed form on file for at least five years after requesting a background check.)

In the interest of safety and security I, the undersigned applicant (also known as "consumer"), authorize Cutting Edge Ministries through its independent contractor, LexisNexis, to procure background information (also known as a "consumer report and/or investigative consumer report") about me, prior to, and at any time during, my service to the organization. This report may include my driving history, including any traffic citations; a social security number verification; present and former addresses; criminal and civil history/records; and the state sex offender records.

I understand that I am entitled to a complete copy of any background information report of which I am the subject upon my request to Cutting Edge Ministries, if such is made within a reasonable time from the date it was produced. I also understand that I may receive a written summary of my rights under the Fair Credit Reporting Act.

Signature: _____ Date: _____

Identifying Information for Background Information Agency (also known as "Consumer Reporting Agency")

Print Name: _____
FirstMiddleLast

Other Names Used (alias, maiden, nickname): _____

Current Address:

_____ Street /P. O. BoxCityStateZip CodeCountyDates

Former Address:

_____ Street /P. O. BoxCityStateZip CodeCountyDates

Social Security Number: _____ Daytime Telephone Number: _____

Driver's License Number: _____ State of Issuance: _____

Date of Birth: _____ Gender _____

Coach Application

Date of Application _____

Name: _____ Church _____

Cell: _____ Work: _____ Home: _____

E-mail _____

Availability: During which day and time are you planning to host your EDGE Club?

M / T / W / TH / F / Time: _____ School name _____

The EDGE is an on-campus interdenominational evangelical ministry of the local church, initiated and led by students. The EDGE exists for the purpose of sharing the Gospel with every student on every campus and connecting them to a local church. All volunteers of EDGE must be followers of Christ whose lives and actions are in conformity with Holy Scriptures and the standards of Cutting Edge Ministries (CEM).

Describe how you would lead someone to Christ. (Use back of this sheet)

Briefly share a) your testimony of how you became a follow of Jesus; b) a recent answer to prayer or an example of how God has recently worked in your life; c) what activities are you involved in that are strengthening your walk and maintaining your spiritual growth. (Use back of this sheet)

Our Statement of Faith

- We believe there is one God, eternally existing in three persons: Father, Son and Holy Spirit.
- We believe the Bible to be the inspired, authoritative Word of God.
- We believe Jesus Christ is true God and man. We believe in His virgin birth, sinless life, miracles, death as a substitute for man, bodily resurrection, ascension to the Father, intercessory work for believers and personal return in power.
- We believe God created man and woman and loves us. We fell from relationship with God through disobedience and we are in desperate need of salvation through faith in Jesus. Those who believe receive forgiveness and eternal life.
- We believe in the present ministry of the Holy Spirit who indwells believers in Christ and empowers them to live a godly life and testify of the Gospel with courage and confidence.
- We believe in the spiritual unity of believers in our Lord Jesus Christ, a unity that is displayed through many congregations that are members of the Body of Christ.
- We believe the local Church is God's tool to equip believers in reaching the world with His love and truth.

I agree with the EDGE Statement of Faith above.

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions or other misrepresentations made by me on the application may result in my immediate dismissal. EDGE also has the right to dismiss coaches as deemed necessary by CEM.

Should my application be accepted, I agree to be bound by the policies of EDGE and to refrain from unscriptural conduct in the performance of my services on behalf of the organization.

I further state the I HAVE CAREFULLY READ THE FOREGOING AND KNOW THE CONTENTS THEREOF, AND I SIGN THIS OF MY OWN FREE WILL.

I have received the Edge Club Manual and commit to following the guidelines for coaching an Edge Club.

Name (printed) _____

Signature _____ Date _____

Please mail (Cutting EDGE Office 8624 Phoenix Dr. Manassas, VA 20110) or fax (703-361-9607) **both pages** of this application. If you are uncomfortable mailing or faxing this information, please call our office to make arrangements for a staff member to pick it up for you. (703-393-9003)