



For Office Use Only	
Date Received	Mobilizer

Mobilization Release of Information

Applicant Authorization and Consent for Release of Information

By signing this authorization and release of information form for Global Partners I consent to:

- Allow Global Partners to confidentially review and evaluate my physical health and emotional wellness.
- Allow Global Partners to personally contact confidential references on my behalf.
- Allow Global Partners to determine my ability for missionary service based on the following criteria but not limited to: spiritual maturity, emotional wellness, physical health, cross-cultural adaptability, personal gifts and skills, and organizational compatibility.

Further, I understand that if I were to be appointed as a missionary with Global Partners:

- I am responsible to raise all funds necessary for my term of missionary service.
- I am required to attend Global Partners' Missionary Orientation prior to any team building or fund raising as a missionary. (Not required for GO-Net Volunteers.)
- I am required to attend Global Partners' Missionary Training Institute before I am cleared to deploy for my term of missionary service. (Not required for GO-Net Volunteers.)
- My picture, bio, team building schedule, birthday/anniversary, contact information, faith fund status, and other information may be shared by Global Partners in promotion of the organization and/or our ministry via web, email, publications, prayer updates, and other forms of communication.

This release constitutes my consent and authority for Global Partners and its agents to obtain and examine copies and abstracts of records and receive statements and information regarding my background. I hereby authorize the release of all records, including but not limited, to the following: employment information, credit bureau information, educational information, military information, residence(s) records, health records, psychological evaluations and criminal records. I also waive my right to review any of the above documents, reports, records or information, and agree that Global Partners may solicit these documents, reports, records or information based on my waiver of my rights to review the same.

I further release Global Partners and its agents, and any individual, party, or institution, from any and all liability and responsibility arising from the release of any such statements, information, abstracts or records. Photocopies, scans or facsimiles of this release are as valid as the original signed by me.

APPLICANT

Name [printed] _____

Date of Birth _____

Signature _____

Date _____