

## Background Check & General Release Form

As required by the Fair Credit Reporting Act, this is to advise you that, in connection with your application for employment, contract, or volunteer services, our company may obtain information about you from a consumer reporting agency. Information requested may regard your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living.

Our company reserves the right to obtain a consumer report at any time during the application process. If hired, our company also reserves the right to obtain a consumer report at any time during ongoing employment with us. I certain states (CA, MN, OK) you may request copies of these reports by checking here \_\_\_\_\_.

Prior to taking an adverse action based, in whole or in part, on the information contained in your consumer report, our company will provide you with a Notification of Pre-Adverse Action that will accompany a copy of your report and a summary of your rights under the Fair Credit Reporting Act.

I acknowledge receipt of the above notice and I authorize your company to obtain a consumer report. The purpose of this form is to notify you that an investigation report will be conducted on you in the course of consideration for this request.

### \* REQUIRED FIELDS

First Name: \* \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Name Suffix: \* \_\_\_\_\_

Maiden name or any aliases used in the past: \_\_\_\_\_

Social Security: \* \_\_\_\_\_ Date of Birth: \* \_\_\_\_\_

Present Address: \* \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Driver's License number: \* \_\_\_\_\_

State issued: \* \_\_\_\_\_ Expiration date: \_\_\_\_\_

Telephone: \* \_\_\_\_\_ Alternate: \_\_\_\_\_

Please list your last seven years of residence (include city and state) \*

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In connection with this request, I hereby authorize all corporations, employers, education institutions, law enforcement agencies, city, state, and federal courts, military services, and persons to release information they may have about me to the person or company with which this form has been filed or their agent. I consent to a criminal background check being run with the information given above. This releases the aforesaid parties from any liability and responsibility for collecting any information.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_