



Background Verification Release Form

AGENCY INFORMATION

Form with fields: Date, Agency Name, Contact Name, Agency's Main Phone Number, Agency's Fax Number

APPLICANT INFORMATION:

Form with fields: Applicant Full Name (Last, First, MI), Maiden or Other Name(s) Used, Current Address, City, State, Zip Code, County, Social Security Number, Date of Birth, Driver's License Number, State Issued, Position Applied for, Contact Phone Number, Email Address, Gender (Male/Female), Race (African American, American Indian, Anglo, Asian, Hispanic, Other)

(the "Organization") may request a comprehensive review of your background information from a consumer reporting agency in connection with your employment/volunteer application and for employment/volunteer purposes, including promotion, reassignment, or retention as an employee or volunteer. Your background information may be obtained in the form of consumer reports and/or investigative consumer reports. These reports may be obtained at any time after receipt of your authorization and, if you are selected by the organization, throughout your volunteering or employment VERIFYI, 2800 Live Oak Street, Dallas TX 75204, 214-818-9839, and its designated agents and representatives or another consumer reporting agency will prepare or assemble the reports. The scope of the consumer report/investigative consumer report may include, but is not limited to, the following areas: consumer credit, names and dates of previous/current employment, worker's compensation claims, criminal history records (from local, state, federal, international and other law enforcement agencies' records), sexual offender's lists, wants and warrants records, motor vehicle records, military records, educational verification, license verification, civil cases, OIG/GSA, OFAC/patriot act, any sanction lists, finger printing and drug testing. These reports may include information as to your general reputation, character, personal characteristics, mode of living, work habits, job performance and experience along with reasons for termination of past employment from previous employers. You may request more information about the nature and scope of any investigative consumer reports by contacting the organization. A summary of your rights under the Fair Credit Reporting Act is also being provided to you.

Authorization and Release

I, _____ authorize the complete release of these records or data pertaining to me which an individual, organization, firm, corporation, institution, school or university, law enforcement or public agency may have. I authorize the full release of the information described above, without any reservation, throughout any duration of my employment/volunteering at the organization. I release all persons or entities from liability from any alleged damage that may result from furnishing accurate information in good faith to the organization.

I certify that all information provided below is true and accurate to the best of my knowledge. This authorization and consent shall be valid in original, facsimile ("fax"), or copy form.

The following information is required by law enforcement agencies and other entities for identification purposes when checking records. It is confidential and will not be used for any other purpose.

PLEASE PRINT LEGIBLY:

Applicant's Signature

Date

Applicant's Printed Name

Parent/Guardian's Signature (if under 18 years of age)