DISCLOSURE AND AUTHORITY TO RELEASE INFORMATION PREPARATION OF A CONSUMER REPORT FOR EMPLOYMENT PURPOSES

Pursuant to the federal Fair Credit Reporting Act (Section 6 designated agents and representatives (Verified Credentials,	
background through a consumer report and/or an investigemployment, promotion, reassignment or retention as an econsumer report/investigative consumer report may include verification of Social Security number; current and previous personnel files; education; references; credit history and report report in any or all federal, state or county jurincluding traffic citations and registration; and any other public	gative consumer report to be generated for employee. I understand that the scope of the e, but is not limited to, the following areas: residences; employment history, including all orts; criminal history, including records from any risdictions; birth records; motor vehicle records,
I,, authorize the composition me that an individual, company, firm, corporation or purequest any present or former employer, school, police dephaving personal knowledge of me to furnish BVU Authorian information in their possession regarding me in connection authorizing that a photocopy of this authorization be accepted	blic agency may have. I hereby authorize and artment, financial institution or other persons ty or its designated agents with any and all on with an application of employment. I am
I understand that, pursuant to the federal Fair Credit Reportin upon the consumer report, a copy of the report and a summa me. Information from the report will not be used in viola employment opportunity law or regulation.	ary of the consumer's rights will be provided to
If currently employed, may your current employers be contacted	ed?
I request a copy of the report.	☐ Yes ☐ No
Please read the following and, if acceptable, authorize us to ore prepared by Verified Credentials, Inc. as noted above for employee	
AUTHORIZATION – TO PREPARE INVESTIGATIVE CONSUM	MER REPORT FOR EMPLOYMENT PURPOSES
I authorize the appropriate individuals, companies, institutions for the preparation of an investigative consumer report on me inquires necessary for the same.	
Legal Last Name Legal First Name	Legal Middle Name
Street Address	
City State	Zip Code

Contact Information: Email: Day		Day Time Ph	y Time Phone:	
Please list any addition	onal addresses you have	lived, worked, and attended	schools in during the past 7 years:	
City	State	City	State	
City	State	City	State	
Other name(s) used i	n the past (example: ma	niden, name from a previous	marriage, etc.)	
Drivers License Numb	per State Issued	Expiration Date	Date of Birth	
THE SAME AUTHORIT	Y AS THE ORIGINAL AND	•		