



CONSENT FOR BACKGROUND CHECK

Full Name: _____

Other Name(s) Used with Associated Date(s) : _____

Address: _____

City _____ State _____ Zip _____

No. of Years at this address: _____

SSN: _____ - - _____ Date of Birth:* _____

Driver's License No. _____

State of Issue _____ License Expiration Date: _____

*Not to be used for discriminatory purposes

In connection with my potential or continued employment with _____ (Employer), I understand that a consumer report or investigative consumer report may be conducted that may include the following information:

	Signature	Date
Residence Records	_____	_____
Criminal/Court Records	_____	_____
Motor Vehicle Records	_____	_____
Employment/References	_____	_____
Education Credentials	_____	_____
Credit History	_____	_____

By signing in the space(s) above, I am authorizing Ascertain Screening and Investigations, LLC, acting as a representative for Employer, to obtain records and to receive statements and information regarding my background, character, general reputation, personal characteristics and mode of living. I hereby authorize any court agency, state or federal agency, information service bureau, current/previous employer, reference or educational institution contacted by Ascertain Screening and Investigations, LLC, acting as representative for Employer, to furnish the above authorized information. I further acknowledge that a facsimile or photographic copy of this release form shall be valid as the original. According to the Fair Credit Reporting Act (FCRA), I am entitled to know if employment is denied because of information obtained by my prospective employer from a consumer reporting agency. If so, I will be advised of the name of the agency and provided with a copy of my consumer report. This authorization shall remain in effect during my employment with Employer.

EMPLOYMENT DISCLOSURE STATEMENT

The Fair Credit Reporting Act requires that we disclose to you that a consumer report or an investigative consumer report may be obtained about you for employment purposes as part of a pre-employment background investigation, and, if you are hired, at any time during your employment with the employer. Such report may include information on your character, general reputation, personal characteristics or mode of living. This report will be obtained by:

Ascertain Screening and Investigations, LLC
170 Mill Street, Suite 200
Gahanna, Ohio 43230
614.858.0100 (phone)
614.418.9617 (fax)

Please acknowledge receipt of this disclosure:

(Signature)

Printed Name of applicant/employee:

Date: _____

California, Minnesota and Oklahoma Residents Only:

You will be provided with a copy of your consumer report or investigative consumer report if you initial below. This report may be obtained from Ascertain Screening's investigative report file at any time prior to your receipt of such copies, to the extent available, by contacting Ascertain Screening.

____ initial

California Residents Only:

You may view the file maintained on you by Ascertain Screening and Investigations, by submitting proper identification. This may be done in person (after supplying proper identification); by certified mail after written request, with proper identification for copies to be sent to a specified addressee; or, by telephone, upon your written request, with proper identification. Copies are available for a fee which will not exceed the cost of normal duplication. Ascertain Screening can provide a trained member of their staff to explain the contents of this report to you, including any coded information. If you appear in person, you may be accompanied by one other person, who will also be required to present identification.

____ initial