

**Consumer Report / Investigative Consumer Report  
Disclosure and Authorization**

I understand that, in connection with my application for employment or at any time during my employment, **COMMUNITY PARTNERS OF STRAFFORD COUNTY** may conduct a background investigation on me for employment purposes.

I understand **COMMUNITY PARTNERS OF STRAFFORD COUNTY** may utilize PT Research, Inc., a consumer-reporting agency, to prepare a consumer report or investigative consumer report, as defined under the Fair Credit Reporting Act (15 U.S.C. § 1681, *et seq.*), in connection with the background investigation. A “consumer report” means any written, oral, or other communication of any information by a consumer reporting agency bearing on my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living, which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in establishing my eligibility for employment purposes. An “investigative consumer report” means a consumer report or portion thereof in which information on my character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with my neighbors, friends, or associates or with others with whom I am acquainted or who may have knowledge concerning any such items of information. Information for a consumer or report and/or investigative consumer report may be retrieved from several sources, including but not limited to public records, educational institutions, financial institutions, law enforcement and other government agencies, credit bureaus, and personal interviews with my current and former employers, friends, neighbors and associates. The information received may include, but is not limited to, academic, residential, achievement, job performance, attendance, litigation, personal history, credit reports, driving history, and criminal history records consistent with federal and state law. I understand that this information may be transmitted electronically and I authorize such transmission.

I further acknowledge that I have received a copy of the “Summary of Your Rights Under the Fair Credit Reporting Act” which is attached to this Authorization. In the event an investigative consumer report is prepared, I understand that I may submit a written request for additional disclosures regarding the nature and scope of the investigation requested as well as a summary of my rights under the FCRA.

If information from a consumer report or an investigative consumer report is used in whole or in part in making an *adverse decision* concerning my employment or application for employment, before making the adverse decision **COMMUNITY PARTNERS OF STRAFFORD COUNTY** will provide me with a copy of the consumer report or investigative consumer report and a description in writing of my rights under the Fair Credit Reporting Act.

I understand that if I disagree with the accuracy of any information contained in the report, I must notify **COMMUNITY PARTNERS OF STRAFFORD COUNTY** within 10 days of my receipt of the report.

**AUTHORIZATION**

I hereby authorize **COMMUNITY PARTNERS OF STRAFFORD COUNTY** to obtain a consumer report and/or an investigative report about me. If I am hired by **COMMUNITY PARTNERS OF STRAFFORD COUNTY**, this authorization shall remain on file and shall serve as an ongoing authorization for **COMMUNITY PARTNERS OF STRAFFORD COUNTY** to procure consumer reports and/or investigative consumer reports at any time during my employment. I agree that a photocopy of this authorization may be accepted with the same authority as the original.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Background Investigation & Release of Information Authorization

I, \_\_\_\_\_, hereby authorize, without reservation, PT Research and any party or agency contacted by PT Research, to furnish the above information. I further release and forever discharge COMMUNITY PARTNERS OF STRAFFORD COUNTY, PT Research, and any person/entity from which they obtained information from any liability resulting from providing such information.

I understand that this information will be transmitted electronically and authorize such transmission. I am willing that a photocopy of this authorization be accepted with the same authority as the original, and that if employed by COMMUNITY PARTNERS OF STRAFFORD COUNTY this authorization will remain in effect throughout my employment.

\_\_\_\_\_  
Signature\_\_\_\_\_  
Social Security Number\_\_\_\_\_  
Date

*The following information is provided voluntarily to identify you in the background screening process, and is not part of your employment application. Please print clearly.*

\_\_\_\_\_  
Last Name\_\_\_\_\_  
First Name\_\_\_\_\_  
Middle Name\_\_\_\_\_  
Street Address\_\_\_\_\_  
City\_\_\_\_\_  
State\_\_\_\_\_  
ZIP\_\_\_\_\_  
Driver's License Number\_\_\_\_\_  
State of License\_\_\_\_\_  
Expires On\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
List any other CITIES AND STATES in which you have lived during the previous 7 years.

\_\_\_\_\_  
List any other LAST NAMES you have used during the previous 7 years.

\_\_\_\_\_  
List any other LAST NAMES under which you received your GED, high school diploma, or other degrees.

**Are you applying for employment in CALIFORNIA\*, MINNESOTA, or OKLAHOMA?**

Yes  No

**If so, would you like to request a copy of any report prepared on you?**

Yes  No

**\*CALIFORNIA APPLICANTS:** Under California law, the reports ordered about you for employment purposes within the State of California are defined as "Investigative Consumer Reports." These reports may contain information on your character, general reputation, personal characteristics, and/or mode of living. Under California Civil Code §1786.22, you may view the report(s) maintained at the CRA during normal business hours. You may also obtain a copy by submitting proper identification and paying the cost of duplication by appearing at the CRA in person, by mail, or by telephone. The CRA is required to have personnel available to explain the report(s) and to explain any coded information. If you appear in person, you may be accompanied by a person of your choice, if s/he furnishes proper identification

**NEW YORK and MAINE APPLICANTS:** You have the right, upon written request, to be notified whether a consumer report was requested about you by the above-named company.

**NEW YORK APPLICANTS:** Should a consumer report received by an employer contain criminal conviction information, the employer must provide to the applicant or employee who is the subject of the report, a printed or electronic copy of Article 23-A of the New York Correction Law, which governs the employment of persons previously convicted of one or more criminal offenses.

\_\_\_\_\_  
Please initial here to acknowledge receipt of Article 23-A of the New York Correction Law.