

Background Check Authorization Form

CONFIDENTIAL

Print Name: _____
(First Name) (Middle Name) (Last Name)

Former Name (s): _____

Current Address (Since): _____
(Month/Year) (Street) (City) (State) (Zip)

Previous Address (From): _____
(Month/Year) (Street) (City) (State) (Zip)

Social Security Number: _____ Date of Birth: _____

Driver License Number: _____ State Issued: _____

Telephone Number: _____ Email: _____

The information contained in this application is correct to the best of my knowledge. I hereby authorize: **The Hills Church / Legacy Christian Academy** and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative scope of the consumer report to be generated for employment and/or volunteer purposes. The reports may contain information about you relating to your criminal history, credit history, driving and/or motor vehicle records, education or employment history, or other background checks. The scope of this notice and below authorization is not limited to the present and, if you are hired, will continue throughout the course of your employment and/or volunteerism, and allow **The Hills Church / Legacy Christian Academy** to conduct future screenings for retention, promotion, reassignment, and/or continued volunteerism as permitted by law and unless revoked by you in writing.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me, to **The Hills Church / Legacy Christian Academy** or its agents.

I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources.

****The Hills Church / Legacy Christian Academy** and its designated agents and representatives shall maintain all information received from this authorization in a confidential manner in order to protect the applicant's personal information, including, but not limited to: addresses, social security numbers and dates of birth.

Signature: _____ Date: _____

OFFICE USE ONLY

Submit Date:

Retrieve Date:

☐ Church Employee / Volunteer

☐ School Employee / Volunteer

Disclosure Form

DISCLOSURE FORM TO OBTAIN CONSUMER REPORTS FOR EMPLOYMENT PURPOSES

Please Read Carefully Before Signing the Authorization

I understand that the scope of the consumer report / investigative consumer report may include, but is not limited to the following areas: Verification of social security number, credit reports, current and previous residences, employment history, education background, character references, drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state and county jurisdictions, driving records, birth records, and any other public record.

DISCLOSURE:

In considering you for employment and, if you are employed, in considering you for subsequent promotion, assignment, reassignment, retention, or discipline, Legacy Christian Academy and The Hills Church may request and rely upon one or more consumer reports or investigative consumer reports about you that we obtain from one or more consumer reporting agencies.

For explanation purposes:

- a “consumer report” is a written, oral, or other communication of any information by a consumer reporting agency bearing on your 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 making an employment-related decision about you. Such information may include, for example, credit information, criminal history reports, or driving records; and
- an “investigative consumer report” is a consumer report in which information on your character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with your prior employers, neighbors, friends, or associates, or with others who may have knowledge concerning any such items of information.

In the event an investigative consumer report is requested about you, you are entitled to additional disclosures regarding the nature and scope of the investigation requested, as well as a written summary of your rights under the Fair Credit Reporting Act (“FCRA”).

Under the FCRA, before the Company can obtain a consumer report or investigative consumer report about you for employment purposes, we must have your written authorization. Before we take adverse action on the basis, in whole or in part, of information in that report, you will be provided a copy of that report, the name, address, and telephone number of the consumer reporting agency, and a summary of your rights under the FCRA.

AUTHORIZATION:

I have read and understand the foregoing Disclosure and authorize Legacy Christian Academy and The Hills Church to obtain and rely upon consumer reports or investigative consumer reports concerning me obtained by one or more consumer agencies. By my signature below, I authorize Legacy Christian Academy and The Hills Church to obtain any such reports and to share the information received with any person involved in their decision about employing me or my involvement in activities with Legacy Christian Academy and The Hills Church.

Signature: _____ Date: _____

Printed Name: _____