Notification and Authorization to Release Criminal Information for Employment Purposes

Notification

The position for which I am being considered requires me to consent to a criminal background check as a condition of employment. This check includes the following: Criminal history reference searches for felony and misdemeanor convictions at the county and federal levels of every jurisdiction where I currently reside or where I have resided during the past 7 years; and sex offender registry searches at the county and federal levels in every jurisdiction where I currently reside or where I have resided.

Authorization

I hereby authorize FHSU to conduct the criminal background check described above. In connection with this, I also authorize the use of law enforcement agencies and/or private background check organizations to assist FHSU in collecting this information. Validity Screening Solutions has been secured as a third party vendor (consumer reporting agency) to assist FHSU in collecting and verifying information.

I also am aware that records of arrests on pending charges and/or convictions are not an absolute bar to employment. Such information will be used to determine whether the results of the background check reasonably bear on my trustworthiness or my ability to perform the duties of my position in a manner which is safe for FHSU students, employees, and other University community members.

Position(s) Applied for:_____

FHSU Unit/Department:_____

Please print (for identification purposes):

Full Legal Name:_____
First Middle Last

Other Names You Have Used in Past Seven Years:_____

Current Address:_____

Previous Address (most recent):_____

Addresses in the 7 years prior to completing this authorization:_____

_____

Phone Number:_____ Alternate Phone Number:_____

Date of Birth:_____ Gender: Female_____Male_____
Month/Day/Year

Social Security Number:_____

Driver's License #_____ State of Driver's License_____

Have you ever been convicted of a criminal *offense or have any pending criminal* charges against you?

*This refers only to felonies and misdemeanors; you do not need to include non-criminal traffic violations or municipal ordinance violations.

Yes_____(provide detail on next page) No_____

To the best of my knowledge, the information provided in this Notice and Authorization and any attachments thereto is true and complete. I understand that any falsification or omission of information may disqualify me for this position and/or may serve as grounds for the severance of my employment with FHSU. By signing below I hereby provide my authorization to FHSU to conduct a criminal background check and I acknowledge that I have been provided with a summary of my rights under the Fair Credit Reporting Act which is attached. In addition to those rights, I understand that I have a right to appeal an adverse employment decision made by FHSU based on my background check information within three business days of receipt of such notice and that a determination on my appeal will be made in seven working days from FHSU's receipt of such appeal.

_____ _____
Signature Date