FOR CONTRACTORS

*This Disclosure must be provided as a stand-alone form and separate from the Summary of Rights and State Law Disclosures. This form is provided for educational purposes only and does not constitute legal advice. Please consult with legal counsel prior to using this form as part of your screening process.*

**BACKGROUND CHECK AUTHORIZATION**

I certify that I have received, read, and understand the *Background Check Disclosure*, *A Summary of Your Rights Under the Fair Credit Reporting Act* (provided with this Background Check Authorization)*.*

I hereby authorize \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to obtain from a consumer reporting agency, consumer reports and/or investigative consumer reports about me in connection with my application for a contractor position, and if accepted, at any time during the course of my assignment, to the extent permitted by law.

I hereby authorize law enforcement agencies, public and private schools, federal, state and local agencies and courts, credit bureaus, information bureaus, current and former employers, financial institutions, licensing agencies, governmental agencies, the military, and other individuals and entities to provide any and all information that is requested by Candid Research, Inc.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name First Name Middle Name

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Maiden Name or Other Name Used Phone No. Email

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

Date of Birth Social Security No. Driver’s License No. State Issued

List all cities, counties, and states in which you were a resident or employed during the past seven (7) years:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address City State Zip Code

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address City State Zip Code

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Address City State Zip Code

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Address City State Zip Code

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Address City State Zip Code

**I agree that my electronic signature is the legal equivalent of my handwritten signature.**

🞏 Yes, I wish to receive a free copy of my report. Please send to my 🞏email or 🞏mail to address listed above.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_
Signature Printed Name Date

2020.05.24

**ADDITIONAL STATE LAW NOTICES**

If you live, or are applying for a position in, any of the states listed below, please review the additional notice that applies to you concerning the Company’s procurement of a background report about you from a consumer reporting agency (the “Agency”).

**California Applicants and Residents:** The Company will procure the report from the following consumer reporting agency: Candid Research, Inc., 4175 E. La Palma Ave., Suite 108, Anaheim, CA 92807 - (714) 974-5430. Candid Research’s privacy policy can be found at [www.candidresearch.com](http://www.candidresearch.com). I understand that I have the right to access my file as maintained by Candid Research, Inc. during normal business hours. By submitting proper identification and paying any duplication costs, I have the option of requesting a copy of my file (1) via mail, or (2) in person at Candid Research, Inc.’s office during normal business hours and with reasonable notice (I may be accompanied by one other person, provided that person furnishes proper identification). I also may receive a summary of the file by calling Candid Research, Inc., who will have trained personnel available to explain my file as well as any coded information contained therein. A more detailed “Summary of Your Rights Under California Civil Code Section 1786.22” has been provided with this form.

**Maine/Massachusetts/Montana Applicants and Residents:** Upon request, you will be informed whether or not an investigative consumer report was requested by the Company, and to receive a copy of such report when it is complete.

**Minnesota Applicants and Residents:** Upon written request, the Agency will make a complete and accurate disclosure of the nature and scope of the report provided to the Company. Minnesota law requires the Agency to provide this disclosure within five days after the request is received or the consumer report is requested, whichever is later.

**New Jersey Applicants and Residents:** Upon request, the Agency will send you a copy of any investigative consumer report about you received by the Company.

**New York Applicants and Residents:** I hereby acknowledge that I have received and read a copy of Article 23A of the New York Correction Law. I understand that upon written request, I will be advised by the Company if any further checks are requested and will be provided by the Company with the name and address of the consumer reporting agency. I may receive and inspect a copy of the report by contacting the Agency.

**Washington Applicants and Residents:** If you make a written request to Company within a reasonable time of this notice, the Company will provide a complete and accurate disclosure, in writing, of the nature and scope of any investigative consumer report that has been requested. The Company will provide the disclosure, by mail or otherwise, within five days after receiving your request or after requesting the report, whichever is later. You also have the right to ask the Agency to provide you with a summary of your rights under the Washington Fair Credit Reporting Act.

**Colorado, Connecticut, Maryland, Oregon, Vermont, and Washington Applicants and Residents:** If a report contains information bearing on your credit worthiness, credit standing or credit capacity, it will be because the information is substantially related to the position for which you are being considered/are currently occupying and to evaluate whether you would present an unacceptable risk of theft or other dishonest behavior in the position for which you are being considered/are currently occupying.

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Signature Printed Name Date

2020.05.24