

BACKGROUND CHECK AUTHORIZATION FORM

1. 1. Standalone Disclosure Regarding Consumer Reports

IMPORTANT — PLEASE READ CAREFULLY. This page is a disclosure and contains no other information. [COMPANY NAME] ("the Company") may obtain one or more consumer reports or investigative consumer reports about you from a consumer reporting agency for employment purposes, including for the purposes of evaluating you for employment, promotion, reassignment, retention, or continued employment. These reports may be obtained at any time after receipt of your authorization and, where you have agreed to ongoing authorization, throughout your employment to the extent permitted by law. A consumer report may contain information about your character, general reputation, personal characteristics, and mode of living, and may include information from public records and from interviews. This document must not be combined with a job application, a liability release, an arbitration provision, or any other content, and any state-specific notices are provided to you separately.

2. 2. Scope of the Report

The report may include, to the extent permitted by applicable federal, state, and local law, the following categories of information: criminal records, including county, statewide, federal, and national database searches; verification of prior employment, including dates, position, and reason for separation where lawfully obtainable; verification of education, degrees, certifications, and professional licenses; motor vehicle and driving records, where the position involves driving; sex offender registry searches; national and international sanctions and watch list searches; social security number trace and address history; and, only where permitted by law and relevant to the position, credit history. Not all categories will be requested for every position, and the specific searches ordered for this position are: [LIST SEARCHES ORDERED FOR THIS ROLE].

3. 3. Consumer Reporting Agency Information

The consumer reporting agency preparing the report is [SCREENING COMPANY NAME], located at [SCREENING COMPANY ADDRESS], telephone [SCREENING COMPANY PHONE], website [SCREENING COMPANY WEBSITE]. You may contact this agency directly to request information about the nature and scope of any investigative consumer report prepared about you and to request a copy of any report it has furnished about you. The agency has provided the Company with a copy of the federal summary of your rights under the Fair Credit Reporting Act, which is furnished to you together with this disclosure as a separate document.

4. 4. Applicant Identifying Information

Complete the following so that records can be accurately matched to you. Full legal name: [FULL LEGAL NAME]. Other names used, including maiden or former names: [OTHER NAMES AND DATE RANGES]. Date of birth: [DATE OF BIRTH — collected solely to identify records accurately and not used in any hiring decision]. Social security number: [SOCIAL SECURITY NUMBER]. Driver license number and issuing state: [LICENSE NUMBER AND STATE], required only where the position involves driving. Current address: [STREET, CITY, STATE, ZIP], since [MOVE-IN DATE]. Prior addresses for the past [NUMBER] years: [PRIOR ADDRESSES WITH DATE RANGES]. Telephone: [PHONE NUMBER]. Email: [EMAIL ADDRESS]. Position applied for: [POSITION TITLE].

5. 5. Authorization and Consent

I have read and understand the disclosure provided to me, and I authorize [COMPANY NAME] to obtain consumer reports and investigative consumer reports about me from [SCREENING COMPANY NAME] or another consumer reporting agency for employment purposes. I authorize any person, business, educational

institution, law enforcement agency, government agency, or former employer having information about me to release that information to the consumer reporting agency or to the Company, to the extent permitted by law. I understand that I may withdraw this authorization at any time by written notice to the Company, and that withdrawal will not affect reports already obtained. I understand that providing this authorization is voluntary, and that a decision not to provide it may mean the Company cannot proceed with my application for a position that requires screening.

6. 6. Ongoing Authorization (Optional — Initial to Accept)

This section is optional and applies only if you initial below. Where permitted by applicable state and local law, I authorize the Company to obtain consumer reports about me at any time during my employment, without providing a new disclosure and obtaining a new authorization for each report. I understand that some states do not permit an evergreen authorization of this kind and that in those states a new disclosure and authorization will be provided before each report. I understand that I may revoke this ongoing authorization at any time by written notice to [HR CONTACT NAME] at [HR CONTACT EMAIL]. Applicant initials to accept ongoing authorization: _____. Applicant declines ongoing authorization: _____.

7. 7. Summary of Rights and Adverse Action Process

You are being provided with a copy of the federal document titled "A Summary of Your Rights Under the Fair Credit Reporting Act" as a separate attachment, together with any state-required notice applicable to your location. If the Company considers taking adverse action against you based in whole or in part on information in a consumer report, you will first receive a pre-adverse action notice, a copy of the report, and a copy of the summary of rights, and you will be given a reasonable period of time to review the report and dispute inaccurate or incomplete information with the consumer reporting agency before a final decision is made. If the Company then takes adverse action, you will receive a written adverse action notice identifying the consumer reporting agency and explaining your rights, including your right to obtain a free copy of the report from the agency within the statutory period and your right to dispute its accuracy.

8. 8. State-Specific Notices

Certain states and localities require additional notices or provide additional rights, and those notices are provided to you as a separate attachment rather than being combined with the disclosure in Section 1. Applicable jurisdiction for this application: [STATE AND, IF APPLICABLE, CITY OR COUNTY]. Additional notices provided: [LIST ATTACHED STATE OR LOCAL NOTICES]. If you would like a free copy of any report obtained about you, indicate your request here: [] Yes, please provide me with a copy of the report. Deliver the copy to: [EMAIL OR MAILING ADDRESS FOR THE COPY]. Some jurisdictions also restrict when criminal history may be considered, limit consideration of certain records, and require an individualized assessment before adverse action; the Company will follow those requirements where they apply.

9. 9. Applicant Signature

By signing below I confirm that I have received and read the disclosure, that the identifying information I provided is accurate and complete, and that I authorize the background check described above. I understand that an electronic signature has the same effect as a handwritten signature. Applicant signature: _____.

Printed name: [FULL LEGAL NAME]. Date: [DATE]. For company use only — Received by: [HR REPRESENTATIVE NAME]. Date received: [DATE]. Disclosure provided as a standalone document: [YES]. Summary of rights provided: [YES]. State notices provided: [YES / NOT APPLICABLE]. Report ordered on: [DATE ORDERED]. Retention: this form is retained separately from the personnel file for [RETENTION PERIOD] in accordance with company policy.

10. Disclaimer

This template is provided for general informational purposes only and is not legal advice. Background screening is governed by the federal Fair Credit Reporting Act and by a dense and frequently changing layer of state and local law, including ban-the-box and fair chance ordinances, restrictions on the use of criminal and credit history, limits on evergreen authorizations, and specific notice and individualized assessment requirements. Claims for defective disclosure forms are a very active area of class action litigation, and the technical requirements are unforgiving. Do not adopt this form without review by employment counsel licensed in each jurisdiction where you hire, and coordinate the form with your screening vendor. Use of this template does not create an attorney-client relationship with ScanContract.

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