

AUTHORIZATION FORM – www.backgroundcheckadvantage.com

4/20/2016



METRO RPH
Brooks Fleetwood
618-462-2484
Fax 618-465-7221

First Name

Middle Name

Last Name

Alias/Maiden Name(s)

Will Employee's Salary Exceed \$75,000?

 No Yes

Social Security Number

Date of Birth

Race

Gender

 Male Female

Mailing Address (NO P.O. Boxes)

City

State

Zip

As part of the employment volunteer student credentialing process, I consent to the release of my criminal background records and motor vehicle driving records or any search listed below by any and all states or agencies holding such records. I also agree to an investigation and the obtaining of a consumer report solely for employment volunteer student credentialing purposes. By signing this consent, I acknowledge I have received in writing a Disclosure Regarding Procurement of a Consumer Report. I understand that the Company named above may use this consent on multiple occasions to request such consumer reports. This consent will remain effective until I have affirmatively revoked it.

DATE: ____/____/____

Signature of Applicant

BACKGROUND SEARCHES

 OIG (Medicare/Medicaid Fraud & Abuse) **GSA** (Federal Procurement Fraud) ****FCSR**
 SSN Plus (Address & Alias Name are included) **Address Verification** **Alias Name Search**
 Government Watch List (includes DOC Entity List & Denied Persons List, DOT Specially Designated Nationals & Blocked Persons List, DOS Proliferation List & more)

 Wants & Warrants (Nationwide - extraditable only) **OFAC** (Specially Designated Nationals and Blocked Persons List)

Child Abuse/Neglect – **IL**** **IA**** **IN**** **KS**** **MO*** **NE**** **TN**
 ***MO Mental Health Employee Disqualification Registry** **MO EDL** (Employee Disqualification List)

 FEDERAL COURTS - Criminal State 1: _____ 2: _____ **SEX OFFENDER** **Nationwide** or **State 1:** _____

 DRIVING RECORD State _____ **DL#** _____

 PROFESSIONAL LICENSE **National** or **State** _____

Type: _____ **License Number:** _____

 EDUCATION School Name (include campus): _____

City/State: _____ / _____ **Major:** _____ **Graduation Date:** ____/____/____

Degree Type: _____ (BSN, B.A., etc.) **Name While Attending:** _____

If additional Verifications are needed, refer to application during data entry or document on another Background Check Request Form.

 EMPLOYMENT **Company:** _____ **City/State:** _____ / _____

Phone: ____/____-____ **Manager:** _____ **Start Date:** ____/____/____ **End Date:** ____/____/____

Title: _____ **Starting Wage:** \$_____ **Ending Wage:** \$_____

Duties: _____

Reason for Leaving: _____

If additional Verifications are needed, refer to application during data entry or document on another Background Check Request Form.

LIST CITY/COUNTY CRIMINAL SEARCHES NEEDED

States with county by county access only: CA, LA, MA, WV and WY

County 1: _____ **State:** _____ **County 2:** _____ **State:** _____ **County 3:** _____ **State:** _____

STATEWIDE CRIMINAL - A Statewide/State Repository houses records from all jurisdictions throughout the State

<input type="checkbox"/> AL*	<input type="checkbox"/> AK*	<input type="checkbox"/> AZ	<input type="checkbox"/> AR*	<input type="checkbox"/> CO	<input type="checkbox"/> CT*	<input type="checkbox"/> DE	<input type="checkbox"/> DC*	<input type="checkbox"/> FL	<input type="checkbox"/> GA*
<input type="checkbox"/> HI	<input type="checkbox"/> ID**	<input type="checkbox"/> IN	<input type="checkbox"/> IA*	<input type="checkbox"/> KS	<input type="checkbox"/> KY	<input type="checkbox"/> ME	<input type="checkbox"/> MD	<input type="checkbox"/> MI	<input type="checkbox"/> MN
<input type="checkbox"/> MO	<input type="checkbox"/> MS*	<input type="checkbox"/> MT	<input type="checkbox"/> NE	<input type="checkbox"/> NV*	<input type="checkbox"/> NH**	<input type="checkbox"/> NJ	<input type="checkbox"/> NM*	<input type="checkbox"/> NY*	<input type="checkbox"/> NC*
<input type="checkbox"/> ND	<input type="checkbox"/> OH*	<input type="checkbox"/> OK	<input type="checkbox"/> OR*	<input type="checkbox"/> PA	<input type="checkbox"/> RI*	<input type="checkbox"/> SC	<input type="checkbox"/> SD	<input type="checkbox"/> TN	<input type="checkbox"/> TX
<input type="checkbox"/> UT*	<input type="checkbox"/> VA*	<input type="checkbox"/> VT*	<input type="checkbox"/> WA	<input type="checkbox"/> WI					

Note: Nevada & Ohio are **Felony** Only
 Illinois Healthcare-compliance with IL Healthcare Worker Background Check Act (IL Police Full-State Repository Criminal)

MO-includes MO Sex Offender results at no additional cost (MO State Highway Patrol Full-State Repository Criminal search)

***Required Form(s) & **Required Special Form(s) must be ATTACHED when ordering or faxed to 573-893-7669**