

DISCLAIMER: This Notice – Background Investigation document is intended for instructional purposes only and is not intended as legal advice. We recommend you consult with an attorney to review this document and the corresponding state notices to ensure your compliance with the applicable state laws related to background screening and consumer notices and disclosures.

NOTICE – BACKGROUND INVESTIGATION

In connection with your employment with [Faith Lutheran Church of Becker] (the “Company”), notice is hereby given that a consumer report and/or investigative consumer report may be obtained from a consumer reporting agency for employment purposes. These reports may contain information about your character, general reputation, personal characteristics and mode of living, whichever are applicable. They may involve personal interviews with sources such as your neighbors, friends or associates. The reports may also contain information about you relating to your criminal history and/or include a criminal background check, credit history, driving and/or motor vehicle records, education or employment history, or other background checks.

You have the right, upon written request made within a reasonable time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report prepared by contacting the Company and Active Screening Faith, 3853 Northdale Blvd, Suite 362 Tampa, FL 33624; Phone: 1-866-378-8389. For information about Active Screening Faith’ privacy practices, see www.activescreeningfaith.com. 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 allow the Company to conduct future screenings for retention, promotion or reassignment, as permitted by law and unless revoked by you in writing.

ACKNOWLEDGEMENT AND AUTHORIZATION

By signing below, I hereby authorize the obtaining of a criminal background check by the Company at any time after receipt of this authorization and throughout the course of my employment, if applicable.

Signature: _____ Date: _____
(Must be within the last 30 days)

Print Name: _____ SSN*: _____

DOB: _____

*Please note: a search without a full SSN will be processed by name and date of birth only, which will lower the accuracy and quality of the results returned.