

**Consent to Perform Criminal History/Background Check  
In Compliance with the FCRA (Fair Credit Reporting Act)**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name/Initial: \_\_\_\_\_

Maiden or other name(s) used in any and all other records of birth or records of residence. \_\_\_\_\_

\*Address: \_\_\_\_\_ Apartment or #: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

\*\*Date of Birth: \_\_\_\_\_ Social Security Number \_\_\_\_\_ \*\*Gender: \_\_\_\_\_ \*\*Race: \_\_\_\_\_

**\*AS SHOWN ON THE ORIGINAL APPLICATION**

**\*\*TO BE USED FOR CRIMINAL HISTORY CHECKS ONLY AND NOT A PART OF THE PERSONNEL FILE.**

I, \_\_\_\_\_, am an applicant for employment / volunteerism with Company and have been advised that as a part of the application process, the company conducts a criminal history background check. I do hereby consent to the company use of any information provided during the application process in performing the criminal history check. The company has informed me that I have the right to review and challenge any negative information that would adversely impact a decision to offer employment / volunteerism. In addition, I have been informed that I will have a reasonable opportunity to clear up any mistaken information reported within a reasonable time frame established within the sole discretion of the company. Under the Fair Credit Reporting Act, I have been advised that upon request I will be provided the name, address and telephone number of the reporting agency as well as the nature, substance and source of all information.

The following are my responses to questions about my criminal history (if any).

1.  Yes  No Have you ever been convicted or plead guilty before a court for any federal, state or municipal criminal offense? (exclude minor traffic misdemeanors). If yes, please provide details below.

State: \_\_\_\_\_ County: \_\_\_\_\_ Date of Offense: \_\_\_\_/\_\_\_\_/\_\_\_\_

Details of Conviction: \_\_\_\_\_

2.  Yes  No Have you ever received deferred adjudication or similar disposition for any federal, state or municipal offense? If yes, please provide details below.

State: \_\_\_\_\_ County: \_\_\_\_\_ Date of Offense: \_\_\_\_/\_\_\_\_/\_\_\_\_

Details of Conviction: \_\_\_\_\_

3.  Yes  No Have you ever received probation or community supervision for any federal, state or municipal offense?

State: \_\_\_\_\_ County: \_\_\_\_\_ Date of Offense: \_\_\_\_/\_\_\_\_/\_\_\_\_

Details of Conviction: \_\_\_\_\_

\_\_\_\_\_  
Applicant Signature \_\_\_\_\_ Date