NOTIFICATION AND AUTHORIZATION TO EMPLOYEE/APPLICANT THAT A CONSUMER CREDIT REPORT MAY BE OBTAINED

Name: _____ _____ _____ _____ _____
Last First Middle Maiden Other

Gender: ☐ Male ☐ Female ***** Date of Birth (MM/DD/YY) _____

- *Age is not a criterion in any decision, but is used for identification purposes only.*

U.S. Social Security Number

Driver's License Number or State ID Number _____ State _____

Check here if you do not have a Driver's License or State ID card. ☐

Address_____City_____State_____Zip_____

Address_____City_____State_____Zip_____

Address_____City_____State_____Zip_____

NOTIFICATION

In compliance with Public Law 91508 (the Fair Credit Reporting Act), as amended by Public Law 104208 (the Consumer Credit Reporting Reform Act) and applicable state law, this notice is to inform you that a consumer credit report may be obtained in connection with your application for employment or in regards to your current employment. If obtained, this consumer credit report may be used in making decisions concerning your application for employment and/or employment status.

I authorize Innovative Employer Solutions Inc to obtain such a report or reports for use in connection with my application for employment and for other employment related reasons. If hired, this authorization shall remain on file and serve as ongoing authorization for procurement of employment related consumer reports at any time during my employment. I understand that the term "consumer report" includes, but is not limited to, credit checks, criminal background checks, department of motor vehicle reports, and investigative consumer reports. I further understand that the term "investigative consumer report" means a report in which information on my character, general reputation, personal characteristics, or mode of living is obtained through others with whom I am acquainted or who may have knowledge concerning of such information.

AUTHORIZATION

By signing below, I authorize Innovative Employer Solutions Inc to obtain a consumer credit report on me. I also acknowledge and certify that I have received a copy of this authorization, which contains written notification that a consumer credit report may be obtained on me.

Employee/Applicant Signature: _____ Date: _____

❑ MVR - FL: ❑ MVR - Other States _____, _____, _____
❑ FDLE - FL ❑ Criminal - FL ❑ Criminal - Other States _____, _____, _____
❑ Credit Check ❑ Other _____