



**DISCLOSURE and AUTHORIZATION**

Pursuant to the Fair Credit Reporting Act, this notice is to inform you that as part of our procedure in processing and evaluating your application for employment, we will be obtaining and reviewing a consumer report or an investigative consumer (Background Check) report for employment purposes. This authorization may be used to obtain a consumer report at any time during my employment.

I, \_\_\_\_\_, hereby consent and authorize **Axtell Fire & Rescue Department** or its agents to prepare an investigative consumer report, including but not limited to obtaining a consumer report and public records, such as criminal records, driving records, and judgments that are deemed to have a bearing on my job performance. This consumer report will be used for employment purposes as it is defined in the Fair Credit Reporting Act, section 603 (h). **In using a consumer report for employment purposes, before taking any adverse action based in whole or in part on the report, the person intending to take such adverse action shall provide to the consumer to whom the report relates, a copy of the report and a description in writing of the rights of the consumer under the FCRA, as prescribed by the Federal Trade Commission, section 609(c)(3).** Photocopies of this Disclosure & Authorization form may be presented to and relied upon by Axtell Fire & Rescue Department and others as evidence of my authorization to release information to the Axtell Fire & Rescue Department or its agents from time to time during my employment with Axtell Fire & Rescue Department.

I am providing the following information for the preparation and proper verification of the consumer report.

Have you used another name such as maiden name or other married name? Yes\_\_\_\_\_ No\_\_\_\_\_
If yes, list names and corresponding years. \_\_\_\_\_

Drivers License number: \_\_\_\_\_ State of issuance (DL): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

List all past **counties** of residence **and** corresponding years: (i.e. Scott, IA 2001 – 2008)

County \_\_\_\_\_ Years: From \_\_\_\_\_ through \_\_\_\_\_
County \_\_\_\_\_ Years: From \_\_\_\_\_ through \_\_\_\_\_
County \_\_\_\_\_ Years: From \_\_\_\_\_ through \_\_\_\_\_
County \_\_\_\_\_ Years: From \_\_\_\_\_ through \_\_\_\_\_

Current Address, City, State, & Zip
\_\_\_\_\_

For Minnesota, Oklahoma and California check here if you would like a copy of the consumer report.

New York Applicants or employees: You have the right to inspect and receive a copy of any investigative consumer report requested by employer by contacting Inquirehire at 800-494-5922.

Signature

Date

Email address

Print Full Name - Include Middle Name (please print legibly)

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