

Authorization

I hereby authorize procurement of consumer report(s) and investigative consumer report(s) by Mission Road Ministries and its consumer reporting agency, Essential Screens. If hired (or contracted), this authorization shall remain on file and shall serve as ongoing authorization for Mission Road Ministries to procure such reports at any time during my employment, contract, or volunteer period. I authorize without reservation, any person, business or agency contacted by the consumer reporting agency to furnish the abovementioned information.

In connection with my application for employment, I direct the following regarding my current employer: (please check one). Yes, my current employer may be contacted
No, my current employer cannot be contacted
I understand that I have rights under the Fair Credit Reporting Act, and I acknowledge receipt of the Summary of Rights (initials).
I authorize Mission Road Ministries to use email communication with me to provide me with notices and information regarding any report or use of such report. If I do not have an email address or do not wish to share it, then communication will be by U.S. Mail, which will result in slower communication.
If you have any questions concerning this background screening content, please contact: Essential Screens
1821 North Webb Road, Suite 1
Grand Island, NE 68803
Printed Full Name (First, Middle, Last):
Signature:
Email:

INFORMATION REGARDING YOUR RIGHTS

I understand that I have the right to make a request to the consumer reporting agency: Essential Screens, 1828 North Webb Road Suite 1, Grand Island, NE 68803, phone 888-494-9188, upon proper identification, to obtain copies of any reports furnished to Company by the Agency and to request the nature and substance of **all information** in its files on me at the time of my request, including the sources of information. The Agency will also disclose the recipients of any such reports on me which the Agency has previously furnished within the two year period for employment requests, and one year for other purposes preceding my request (California three years). I understand that I can dispute, at any time, any information that is inaccurate in any type of report with the Agency. I may view the Agency's privacy policy at their website: www essentialscreens com

Signature	Date	
	/	
Acknowledged:		
Personal information in MVRs means information social security number, driver's license number, number and medical or disability information restricted personal information includes your pl medical or disability information relating to any license.	your name, your address clating to any license re- notograph or image, soci	ess, your telephone estrictions. Highly al security number
New Hampshire registered drivers: The consent tyears and is revocable at any time.	for driving records is val	id for only two (2)
I understand that if the report is provided to an emcontact the following office for more information law in regard to these reports: State of Washing Division, 800 5 th Ave, Ste. 2000, Seattle, Washington	regarding my rights under ton Attorney General, C	er Washington state onsumer Protection
I understand that if I am applying for employment i copy of Article 23-A of the New York Correction L		
I understand that if the Company is located in Califoright to request a copy of any report the Company provided to Company. By checking the following sent to me. Initial here:	ny receives on me at the	e time the report is
type of report with the Agency. I may view the www.essentialscreens.com	e Agency's privacy polic	cy at their website

Please Print Clearly

SIGNATURE:

rease rime elearly							
FIRST NAME		MIDDLE NAME	LAST NAME	SUFFIX(Jr., Sr., II, III)			
SOCIAL	SECURITY	DATE OF BIRTH	PLEASE CIRCLE ONE	RACE			
NUMBER		ex.09/10/1981					
			MALE OR FEMALE				
PHONE			E MAIL				
		1	1				

Alias/Maiden/Previous Name(s) Use the back of this form if more space is needed.

FIRST NAME MIDDLE NAME LAST NAME YEARS USED

The above is true and correct to the best of my knowledge:

DATE:

Disclosure

In connection with my application for employment (including contract or volunteer services) with **Mission Road Ministries**, I understand consumer reports will be requested by you ("Company"). These reports may include, as allowed by law, the following types of information, as applicable: names and dates of previous employers, work experience, education, accidents, licensure, credit (as allowed by law – where required, you will be presented with additional disclosures), etc. I further understand that such reports may contain public record information such as, but not limited to: my driving record, workers' compensation claims, judgments, bankruptcy proceedings, evictions, criminal records, creditworthiness, credit capacity, credit standing etc., from federal, state, and other agencies that maintain such records.

In addition, investigative consumer reports (gathered from personal interviews, as applicable, with former employers or landlords, past or current neighbors and associates of mine, etc.) to gather information regarding my work or tenant performance, character, general reputation and personal characteristics, and mode of living (lifestyle) may be obtained.

If I am hired, I understand that my employer can use this disclosure and authorization to continue to obtain such consumer reports throughout my employment, contract period or volunteer service.

Acknowledge:				
		/	/	
Signature	Date			
Printed Full Name	_			