

# Applicant Authorization for Criminal Background Check

Revised 05/19



**Section A: All items must be completed by department. Incomplete or illegible documents may be returned to originating department and may delay final hiring action.**

<b>Department:</b>		<b>Departmental Contact Person (for questions and results):</b>	
<b>Position Title:</b>		<b>Department Contact Phone Number:</b>	
<b>Position Number or type of employment (i.e. adjunct, one-time pay, RD, GA, etc.):</b>			

**Section B: To be completed by applicant/employee.**

**(Please read carefully)**

*We at Radford University welcome your application for employment. We are proud that our success is the result of the quality and caliber of our employees. If you are the finalist selected for employment you will join a community of recognized professionals. To ensure the safety and security of our faculty, staff and students we require your consent to and authorization of a criminal background check. This information is for employment purposes only. A criminal background check is processed only on the candidate selected for employment.*

*I, the undersigned do hereby certify that the information I have provided for the purpose of employment is true and complete to the best of my knowledge. I understand that if I am employed, any false statements will be considered as cause for possible dismissal.*

**PLEASE PRINT CLEARLY: Incomplete or illegible documents will be returned for correction/clarification and may delay timely completion of the action requiring the Criminal Background Check.**

<b>Last Name:</b>	<b>First Name:</b>	<b>Middle Name:</b>	<b>Maiden Name:</b>	<b>Suffix:</b>	<b>Ethnicity:</b>	<b>Sex:</b>
<b>Current Address:</b>						
<b>Date of Birth:</b>	<b>Place of Birth- County/City and State:</b>		<b>Please list all Aliases (Other names you have gone by):</b>			
<b>Social Security Number:</b> _____						
Radford University requests your social security number to conduct a residence history and criminal conviction background check consistent with RU policy. You are not required to disclose your social security number; however, if you do not disclose your social security number you will not be considered for employment.						

List all states and cities or counties where you have lived during the **past seven years**.

Additional States, City/County, dates can be listed on **back** of form. PLEASE PRINT CLEARLY

<b>STATE:</b>	<b>CITY/COUNTY:</b>	<b>DATE (month/year to month/year):</b>
		_____ to Current

## AUTHORIZATION FOR RELEASE OF INFORMATION

I hereby give consent and authorize Applicant Insight, Inc. and/or the Virginia State Police to search the files of the Central Criminal Records Exchange and/or to conduct a criminal history search for any criminal history record and report the results of such search to Radford University.

Signature \_\_\_\_\_

Date \_\_\_\_\_

HR Use Only: Date Keyed \_\_\_\_\_ Keyed by \_\_\_\_\_

DL States Searched \_\_\_\_\_ AI# \_\_\_\_\_ Result \_\_\_\_\_ Date Complete \_\_\_\_\_

**DISCLOSURE NOTICE**  
**[IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION]**  
**DISCLOSURE REGARDING CONSUMER AND/OR INVESTIGATIVE CONSUMER REPORTS**

**RADFORD UNIVERSITY** ("the Company") may obtain information about you for employment purposes and/or contract for services from a third party consumer reporting agency. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history, social security verification, driving history ("driving records"), verification of your education or employment history, or other background checks. Credit history will only be requested where such information is substantially related to the duties and responsibilities of the position for which you are applying or is required by law.

You have the right, upon written request made within a reasonable time, to request whether a consumer report has been provided about you and to disclosure of the nature and scope of any investigative consumer report and to request a copy of your report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history

**The third party consumer reporting agency providing the report is:**

**Applicant Insight, Inc., 5652 Meadowlane Street, New Port Richey, FL, 34652, [www.applicantinsight.com](http://www.applicantinsight.com), 1-800-771-7703.**

The scope of this notice and authorization is all-encompassing, however, allowing the Company to obtain from any outside organization all manners of consumer reports and investigative consumer reports now and throughout the course of your employment and/or contract for services to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

**New York applicants or employees only:** You have the right to inspect and receive a copy of any investigative consumer report requested by the Company by contacting the consumer reporting agency identified above directly. You may also contact the Company to request the name, address and telephone number of the nearest unit of the consumer reporting agency designated to handle inquiries, which the Company shall provide within 5 days. Additionally, upon request, you will be informed whether or not a consumer report was requested by the Company, and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. By signing below, you also acknowledge receipt of Article 23-A of the New York Correction Law.

**Oregon applicants or employees only:** Information describing your rights under federal and Oregon law regarding consumer identity theft protection, the storage and disposal of your credit information, and remedies available should you suspect or find that the Company has not maintained secured records is available to you upon request.

**Washington State applicants or employees only:** You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

**New Hampshire applicants or employees subject to state driving record requests:** Your authorization for the release of your driving record is limited to no more than 2 years from the date of the execution of this document. As it relates to your driving record, you have the right to revoke this authorization at any time.

Last name: \_\_\_\_\_ First name: \_\_\_\_\_ Middle name: \_\_\_\_\_

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

*\*This information will be used for background screening purposes only and will not be used as hiring criteria.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**[Company and/or contractor note: If you do business in Utah, you cannot ask for DOB, driver's license, or SSN until either a confidential offer of employment or at the time the background report will be requested.]**

**ACKNOWLEDGMENT AND AUTHORIZATION**  
**AUTHORIZATION REGARDING CONSUMER AND/OR INVESTIGATIVE CONSUMER REPORTS**

I acknowledge receipt of the DISCLOSURE REGARDING CONSUMER AND/OR INVESTIGATIVE CONSUMER REPORTS and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by the Company at any time after receipt of this authorization and throughout my employment and/or contract for services, if applicable, unless otherwise indicated and/or to the extent permitted by law. In accordance with this notice, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by **Applicant Insight, Inc., 5652 Meadowlane Street, New Port Richey, FL, 34652, [www.applicantinsight.com](http://www.applicantinsight.com), 1-800-771-7703**, another outside organization acting on behalf of the Company, and/or the Company itself. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

**New York applicants or employees only:** By signing below, you also acknowledge receipt of Article 23-A of the New York Correction Law.

**Minnesota applicants or employees only:**

☐ please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

**Oklahoma applicants or employees only:**

☐ please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

**California applicants or employees only:**

☐ Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law. By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW.

Last name: \_\_\_\_\_ First name: \_\_\_\_\_ Middle name: \_\_\_\_\_

Other Names/Alias: \_\_\_\_\_  
*Include Maiden or Name Changes, No Direct Derivatives Ex: Susan vs. Sue, David vs. Dave*

\*Social Security: \_\_\_\_\_ \*Date of Birth: \_\_\_\_\_  
*\*This information will be used for background screening purposes only and will not be used as hiring criteria.*

Driver's License: \_\_\_\_\_ DL State of Issuance: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Present Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**[Company and/or contractor note: If you do business in Utah, you cannot ask for DOB, driver's license, or SSN until either a confidential offer of employment or at the time the background report will be requested.]**

## NOTICE REGARDING BACKGROUND INVESTIGATION PER CALIFORNIA LAW

**RADFORD UNIVERSITY** ("the Company") intends to obtain information about you for employment screening purposes and/or contract for services from a consumer reporting agency. Thus, you can expect to be the subject of "investigative consumer reports" and "consumer credit reports" obtained for employment purposes. Such reports may include information about your character, general reputation, personal characteristics and mode of living. With respect to any investigative consumer report from an investigative consumer reporting agency ("ICRA"), the Company may investigate the information contained in your employment application and other background information about you, including but not limited to obtaining a criminal record report, verifying references, work history, your social security number, your educational achievements, licensure, and certifications, your driving record, and other information about you, and interviewing people who are knowledgeable about you. The results of this report may be used as a factor in making employment decisions. The source of any investigative consumer report (as that term is defined under California law) will be Applicant Insight, Inc., 5652 Meadowlane Street, New Port Richey, FL, 34652, [www.applicantinsight.com](http://www.applicantinsight.com), 1-800-771-7703. The Company agrees to provide you with a copy of an investigative consumer report when required to do so under California law.

Under California Civil Code section 1786.22, you are entitled to find out what is in the ICRA's file on you with proper identification, as follows:

- In person, by visual inspection of your file during normal business hours and on reasonable notice. You also may request a copy of the information in person. The ICRA may not charge you more than the actual copying costs for providing you with a copy of your file.
- A summary of all information contained in the ICRA's file on you that is required to be provided by the California Civil Code will be provided to you via telephone, if you have made a written request, with proper identification, for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or charged directly to you.
- By requesting a copy is sent to a specified addressee by certified mail. ICRA's complying with requests for certified mailings shall not be liable for disclosures to third parties caused by mishandling of mail after such mailings leave the ICRA's.

"Proper Identification" includes documents such as a valid driver's license, social security account number, military identification card, and credit cards. Only if you cannot identify yourself with such information may the ICRA require additional information concerning your employment and personal or family history in order to verify your identity. The ICRA will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information contained in files maintained on you. This written explanation will be provided whenever a file is provided to you for visual inspection. You may be accompanied by one other person of your choosing, who must furnish reasonable identification. An ICRA may require you to furnish a written statement granting permission to the ICRA to discuss your file in such person's presence.

### Notice Regarding Credit Checks:

Pursuant to Section 1024.5 of the California Labor Code, the Company informs you that it may obtain a credit report about you from the above named entity, because you are seeking to work in the following position:

- ☐ An employee covered by the executive exemption set forth in subparagraph (1) of paragraph (A) of Section 1 of Wage Order 4 of the Industrial Welfare Commission;
- ☐ A position in the state Department of Justice;
- ☐ A sworn peace officer or other law enforcement;
- ☐ A position for which the information contained in the report is required by law to be disclosed or obtained;
- ☐ A position that involves regular access to specified personal information for any purpose other than the routine solicitation and processing of credit card applications in a retail establishment, such as bank or credit card account information, social security number, or date of birth;
- ☐ A position which the person can enter into financial transactions on behalf of the company;
- ☐ A position that involves access to confidential or proprietary information;
- ☐ A position that involves regular access to \$10,000 or more of cash; **OR**
- ☐ The Company **will not** obtain a consumer credit report on you.
- ☐ The Company is subject to 15 U.S.C. Sec. 6801-6809, the Gramm-Leach-Bliley Act and Section 1024.5 of the California Labor Code does not apply.

## NOTICE REGARDING CREDIT CHECKS PER VERMONT LAW

Pursuant to Vermont Act No. 154 (S. 95), the Company informs you that it may obtain a credit report about you, for the following reason(s):

- ☐ The information is required by state or federal law or regulation;
- ☐ You seek to be/are employed in a position that involves access to "confidential financial information" (defined as "sensitive financial information of commercial value that a customer or client of the Company and/or contractor gives explicit authorization for the Company and/or contractor to obtain, process, and store and that the Company and/or contractor entrusts only to managers or employees as a necessary function of their job duties");
- ☐ The Company is a financial institution as defined in 8 V.S.A. §11101(32) or a credit union as defined in 8 V.S.A. §30101(5);
- ☐ You seek to be/are employed in a position as a law enforcement officer, emergency medical personnel or firefighter as these terms are respectively defines in 20 V.S.A. §2358, 24 V.S.A. §2651(6) and 20 V.S.A. §3151(3);
- ☐ You seek to be/are employed in a position that requires a financial fiduciary responsibility to the Company or a Company's clients, including the authority to issue payments, collect debts, transfer money or enter into contracts;
- ☐ You seek to be/are employed in a position that involves access to the Company's payroll information;
- ☐ The Company can demonstrate that credit information is a valid and reliable predictor of employee performance in the your specific position of employment;
- ☐ The Company **will not** obtain a consumer credit report on you.

### Completed forms should be submitted to Human Resources:

Online - Securely uploaded using SendSecure

[Upload Instructions](#)

Fax - 540-831-6278

Mail - PO Box 6889 Radford, VA 24142

In Person - 314B Tyler Ave (Tyler Place), Radford, VA

**\*\*Do not send completed forms over email\*\***