## DISCIOSURE & AUTHORIZATION DISCLOSURE - NOTICE REGARDING BACKGROUND INVESTIGATIONS

HLV (Hartwick-Ladora-Victor) Community School District ("Employer") may obtain information about you from a consumer reporting agency for employment purposes. 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 be obtained at any time after receipt of your authorization and, if you are hired, throughout your employment. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. 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 conducted by Background Investigation Bureaun, LLC, ("BIB") who may be reached at 9710 Northcross Center Court, Huntersville, NC 28078, or by phone at (877) 439-3900 or by another outside organization. Other types of information that may be obtained include but are not limited to social security number verification, sex offender registry checks, criminal records checks, inmate records searches, motor vehicle records, and court records checks. The information contained in these consumer reports may be obtained by BIB from public record sources and will not be used to discriminate against you in violation of any law. The scope of this Disclosure and Authorization is all-encompassing, allowing Employer to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and, if you are hired, throughout the course of your employment to the extent permitted by law. The BIB privacy policy may be found at www.BIB.com.

New York applicants or employees only: You have the right to inspect and receive a copy of any investigative consumer report requested by Employer by directly contacting the consumer reporting agency identified above.

## **AUTHORIZATION AND ACKNOWLEDGMENT**

I acknowledge receipt of the DISCLOSURE - NOTICE REGARDING BACKGROUND INVESTIGATION 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" at any time after receipt of this authorization and, if I am hired, throughout my employment. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, military branch, institution, school or university (public or private), information service bureau, past or present employer or supervisor, private business, insurance company or personal reference, and/or other persons to furnish any and all background information requested by BIB, additional third-party organizations acting on behalf of Employer, and/or Employer itself. I agree that a facsimile ("fax") or photographic copy of this Authorization shall be as valid as the original.

Signature:		Date	Date:			
0	Please check this box if you are a Minnesota or Oklahoma applicant or employee and would like to receive a copy of a consumer report if one is obtained by the Employer.					
0	Please check this box if you are a California applicant or employee and you would like to receive a copy of an investigative consumer report or consumer credit report if one is obtained by the Employer at no charge whenever you have a right to receive such a copy under California law. (*If you elect to receive a copy, you are required (on an ongoing basis) to keep Employer informed of address changes so reports are not sent to old addresses.)					
Personal Id	entifying Information for Consumer Reporti	ng Agency - Please print or type (list all	names used, maiden, surname,	alias)		
Last Name		First	Middle			
Last Name		First	Middle			
Last Name		First	Middle			
Home Street Address			Appartmer	Appartment/Unit#		
City		State	Zip			
Phone		Email Address				
*Date of Bir	th	*Social Security No.	Gender	Race		
Drivers Lice	rivers License Number State Issued Expires		Expires			

-ThiS information is for the sole purpose of retrieving the background information listed above and will not be used by Employer for discriminatory purposes.

California applicants or employees only: By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW.

Signature:	Date:	

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