

# NOTICE TO APPLICANT OF INTENT TO OBTAIN A CONSUMER REPORT

Dear Applicant:

In connection with your application for employment, we would like to procure certain background information concerning you which is contained in a consumer report. A consumer report may contain information regarding your: credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, mode of living, and/or criminal background. We may also obtain such a report after you are employed for purposes of evaluation, promotion, reassignment or retention.

Before we may procure a consumer report, you must authorize such procurement in writing. You have the right to decline authorization for us to procure a consumer report. However, we will not consider you further for employment if you so decline. Following, you will find a release which will allow us to obtain a consumer report. Please read the release carefully before signing it and indicating your choice regarding disclosure.

☐ I have read and understand the foregoing.

☐ I understand that I have the right to decline authorization for \_\_\_\_\_ to procure a consumer report concerning me.  
(Company Name)

☐ I understand that the consumer report may contain information concerning my: credit worthiness, credit standing, general reputation, personal characteristics, mode of living, and/or criminal background and may be gathered or obtained during the employment process and/or at anytime during my employment if I am hired.

As outlined under the Fair Credit Reporting Act, if my application is declined based on an adverse credit report, I understand that \_\_\_\_\_ (Company Name) will disclose this fact to me along with the name and address of the consumer reporting agency where it obtained the credit report.

Understanding these rights,

☐ I authorize \_\_\_\_\_ to procure a consumer report concerning me.  
(Company Name)

Finally, I hereby authorize any persons contacted by \_\_\_\_\_ (Company Name) and/or any consumer reporting agency it retains to release any and all pertinent information concerning me they may have, personal or otherwise, and release all such persons who in good faith release such information from liability for any damage that may result there from. A photo copy or facsimile of this authorization is as valid as the original.

☐ I do not authorize \_\_\_\_\_ to procure a consumer report concerning me.  
(Company Name)

WITNESS \_\_\_\_\_

NAME (Print Please) \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_