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Type of Report
 PREFERRED
 COMPLETE
 QUICK
 BASIC
 OTHER _____

COMPANY _____
 AGENT _____
 PHONE# _____
 FAX# _____
 DATE _____

AUTHORIZATION AND RELEASE TO PROCURE CONSUMER REPORTS

(This form is to be filled out separate from the employment application)

As part of the employment screening and selection process, the Employer or potential Employer requires a background investigation and a check of references. Such investigation and checks may require the submission to the Employer of information about the Applicant's social security number (SSN), date of birth (DOB), and driver's license number (DL).

I hereby give the Employer and/or its designees permission and authority to conduct a pre-employment and/or continued employment background investigation and reference check concerning past and present activities. I agree and consent to any investigation the Employer and/or any of its designees may make including, but not limited to, information as to my personal character, general reputation, former employment, education, credit history, driving record, social security wage information, criminal history and other information contained in public records or obtainable from former employers or other references, business or personal.

I hereby consent, authorize and request any former employers, personal references, schools, police, court and personal credit agencies and any other person to respond to verbal or written inquiries from the Employer and/or its designees and to disclose information concerning:

- a. **My previous employment record, including but not limited to positions held, dates of employment, last pay rate, work performance, disciplinary records, reliability and incidents of dishonesty, insubordination, violence, and/or unsafe, harmful or threatening behavior, or other relevant information, including information in my personnel files;**
- b. **My educational records from any and all public or private educational institutions that I have attended including all records of my academic performance, courses attended, grades earned, diplomas, degrees, other certificates earned, or other relevant information;**
- c. **My general background. I specifically request, authorize and consent to the Employer's verbal or written inquiries of personal references about the information contained in my application, as well as my reliability, honesty, and potential tendency, if any, to engage in any form of violence, and/or unsafe, harmful or threatening behavior, or other relevant information;**
- d. **My professional or vocational license or certification that I may have held in the past or may currently hold, including, but not limited to information concerning whether such license or certification is in good standing and any disciplinary or other proceedings concerning such license or certification, or other relevant information;**
- e. **Whether I have a record of criminal convictions, and, if so, the nature of such criminal convictions and all surrounding circumstances available through lawful means. The Employer has advised me that its criminal background check will focus on convictions and that a criminal record will not necessarily disqualify me from employment;**
- f. **My credit history. I understand that the results of a background check of my credit record may be used as a part of the evaluation of my application and that both written and verbal reports will be obtained from the reporting services. I also understand that I can receive such information by making a written request to the Credit-Reporting Agency (CRA) should adverse action be taken against you. To receive such information or access my records, I realize that I must submit proper identification with my request. The Employer will not deny employment solely on the basis that an applicant has filed bankruptcy.**

I am aware that the result of any background investigation performed by the Employer and/or its designees is not the sole criteria used by the Employer in making a decision to hire or not hire any individual, including me. I am also aware that any falsification or misrepresentation of information appearing on my application for employment shall be grounds for termination or not being hired.

I hereby release all persons, companies, corporations or individuals from all liability and responsibility that may result from providing the Employer and/or its designees the information set out herein, including but not limited to, any claims whatsoever for defamation, fraud, misrepresentation, intentional or negligent interference with prospective business relations or contract, breach of contract (including settlement agreement), negligent or intentional infliction of emotional distress, employment discrimination, violation of public policy, and any other potential claims, demands, damages, liabilities and/or actions of any kind whatsoever, whether known or unknown to me, by signing this document. The venue for any legal action or proceedings related to this transaction, or breach of contract, or default, whether a lawsuit is filed or not, shall be properly laid in Spokane County, Washington.

I have carefully read the **Authorization and Release to Procure Consumer Reports** form for and have voluntarily agreed to its terms to assist the Employer in evaluating my qualifications for employment and in meeting hiring goals. I understand that a **BIRTHDATE IS NECESSARY TO VERIFY PUBLIC RECORD INFORMATION AND/OR DRIVING HISTORY. THE FEDERAL AGE DISCRIMINATION ACT OF 1967 PROHIBITS DISCRIMINATION ON THE BASIS OF AGE.** I additionally agree to fully cooperate with the Employer in permitting the release of the above information and reports. Finally, I understand that the information generated, received or maintained during or as a result of its investigation, will be treated as confidential information, and that if denied employment, the Employer will release such information to me upon my written request as required by the Fair Credit Reporting Act (FCRA).

Last Name		First Name		Middle Name	May we contact your current employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Current Street Address		State	Zip	Previous Street Address	State Zip
Date of Birth		Social Security Number		Drivers License Number	State
Applicant Signature				Date	



AUTHORIZATION AND RELEASE FOR REFERENCE, DRIVING ABSTRACT, AND CRIMINAL BACKGROUND INVESTIGATION

Last Name

First Name

Middle Name

Former Name (1)

Former Name (2)

Reference Check: In order to provide the LOTT Clean Water Alliance (LOTT) with information that will be used by LOTT in its hiring decisions, I authorize any person, school, current or past employer, organization or entity disclosed in my resume, application or interview (or disclosed through a criminal background check) to provide to LOTT any information and opinions regarding me including, without limitation, information concerning my job performance, reputation, and character. I acknowledge that the information or opinions may be positive or negative with respect to me, and I may not necessarily agree with the information or opinions. Nevertheless, pursuant to this authorization, I unconditionally release such person, school, employer, organization, or entity from any and all legal liability for furnishing such information and opinions and I unconditionally release LOTT from any and all legal liability, including liability for defamation, in connection with its receipt and use of the reference. I agree not to bring a suit against any person or entity associated with this investigation.

Driving Abstract: I have provided a completed request for my driving record and understand that information received therein may nullify a contingent offer of employment.

Felony Convictions: Conviction of a felony is not an automatic bar to employment. LOTT will investigate only felony convictions that relate to your fitness to perform the job for which you are a candidate.

Have you been convicted of a felony or felonies or released from prison within the past 10 years? () No () Yes

If yes, for each felony disclosed, please provide: 1) the nature of the crime; 2) the date of your conviction; 3) the jurisdiction where you were convicted; 4) the name, address, telephone number of your attorney and the prosecuting attorney. If necessary, continue on the back.

By signing this release, I certify that the information provided is true and accurate and I agree to the following:

A photocopy, fax, or PDF of this signed authorization shall have the same force and effect as the original signed by me.

Signed

Date

