

Background Check Authorization

Print Name: _____
First Full Middle Name Last

Former Name(s) and dates used: _____

Gender: _____ Male _____ Female Social Security Number _____ - _____ - _____

Current Address Since: _____
(Mo/Yr) Street City State/Zip

Previous Address From: _____
(Mo/Yr) Street City State/Zip

Personal Email Address: _____

Previous Affiliation with Bethel: ___None ___Student ___Employee Other _____

Telephone Number: _____ Date of Birth _____

Driver's License Number / State Issues: _____

Have you ever been investigated for a Federal crime? Yes No
If yes, please provide reason for investigation: _____

The information contained on this form is correct to the best of my knowledge. I hereby authorize Bethel College and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report/investigative consumer report may include, but is not limited to the following areas: verification of social security number; current and previous residences; employment history; education background; character references; drug testing; civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records; birth records and any other public records.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me, to Bethel College or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources.

I understand that, pursuant to the Federal Fair Credit Reporting Act, if any adverse action is to be taken based up on the consumer report, a copy of the report and a summary of the consumer's rights will be provided to me.

I hereby release Bethel College, the Social Security Administration and its agents, officials, representative, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may at any time, result to me, my heirs, family, or associates because of compliance with this authorization and request to release.

Signature: _____ Date: _____