

DISCLOSURE and AUTHORIZATION – BACKGROUND INVESTIGATION

In connection with my application for employment or volunteer/intern with The Christian and Missionary Alliance ("C&MA"), I understand that a "consumer report" and/or "investigative consumer report", as defined by the Fair Credit Reporting Act (15 U.S.C. § 1681), will be requested by the C&MA for employment or volunteer/internship purposes, whichever is applicable, from People Facts, a consumer reporting agency as defined by the Fair Credit Reporting Act. These reports may include information as to my character, general reputation, personal characteristics, or mode of living, whichever are applicable. They may involve interviews with sources such as my neighbors, friends, or associates. The report may also contain information about me relating to my criminal history, credit history, driving and/or motor vehicle records, social security number verification, verification of education or employment history, worker's compensation (only after a conditional job offer) or other background checks. Such reports may be obtained at any time after receipt of this Disclosure and Authorization and if I am hired or serve as a volunteer/intern, whichever is applicable, throughout the course of my employment or volunteer/intern service, as permitted by law and unless revoked by me in writing. Client also reserves the right to share my report with any third-party with whom I will be placed to work or volunteer/intern with as a representative of Client. I understand that I have the right, upon written request made within a reasonable amount of time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report to People Facts, 800-600-8999.

Acknowledgement and Authorization

By signing below, I authorize the C&MA or its authorized agents to obtain or prepare consumer reports or investigative consumer reports about me. I acknowledge receipt of a copy of the federal notice entitled *A Summary of Your Rights under the Fair Credit Reporting Act* and certify that I have read this Disclosure and Authorization as well as the summary document explaining my rights under the Fair Credit Reporting Act.

Signature Today's date _____

Printed first Name _____ Middle Initial _____ Last Name _____

SSN _____ - _____ - _____ Date of birth _____

Driver's License/ID# _____ State issuing Driver's License/ID _____

E-mail address _____ Phone (_____) _____

Previous names used _____

Ethnicity (Check one) ☐ American Indian/Alaska Native ☐ Asian ☐ African American ☐ Caucasian
☐ Hispanic/Latino ☐ Native Hawaiian or Other Pacific Islander ☐ Two or more Races ☐ Other/Unknown

Mother's maiden name (for Puerto Rico searches only) _____

Please list any addresses over the past 7 years:

From _____ to _____

Previous home address _____

City _____ State _____ Zip _____ County _____

From _____ to _____

Previous home address _____

City _____ State _____ Zip _____ County _____

From _____ to _____

Previous home address _____

City _____ State _____ Zip _____ County _____

State Consumer Reporting Requirements – Background Investigation

Residents of California and Maine only:

Under state law you have a right to receive a copy of your investigative consumer report and/or consumer credit report, free of charge, if one is requested by Client. By checking the box below a copy of your report will be provided to you at the address you provide on the Disclosure and Authorization.

☐ I wish to receive a copy of any report on me that is requested.

Residents of Massachusetts only:

Under state law you have a right to receive a copy of your investigative consumer report if one is requested by Client. By checking the box below a copy of your report will be provided to you at the address you provide on the Disclosure and Authorization.

☐ I wish to receive a copy of any report on me that is requested.

Residents of Minnesota and Oklahoma only:

Under state law you have a right to receive a copy of your consumer report, free of charge, if one is required by Client. By checking the below box, a copy will be provided to you at the address you provide on the Disclosure and Authorization.

☐ I wish to receive a copy of any report on me that is requested.

Residents of New York only:

Under state law you have the right to inspect and receive a copy of any investigative consumer report requested by Client by contacting Protect My Ministry directly. You also acknowledge receipt of a copy of Article 23-A of the New York Correction Law by checking the below box.

☐ I wish to receive a copy of any report on me that is requested.

Residents of Washington State only:

Under state law you have a right to request a copy of the Washington Fair Credit Reporting Act's disclosure to consumers (RCW 19.182.070) and a copy of your report by contacting Protect My Ministry directly.

☐ I wish to receive a copy of any report on me that is requested.