



EMPLOYMENT / VOLUNTEER SCREENING

DISCLOSURE AND AUTHORIZATION FOR EMPLOYER/COORDINATOR TO ACCESS CONSUMER REPORTS

Dunwoody United Methodist Church • 1548 Mt. Vernon Rd. • Atlanta, GA 30338 •

DISCLOSURE

In connection with your application for employment or to volunteer at **Dunwoody United Methodist Church, (Dunwoody UMC), Dunwoody UMC** may obtain a “consumer report” and/or an “investigative consumer report” on you from **TRAK-1 TECHNOLOGY**, a consumer reporting agency, or from any third party, in strict compliance with both state and federal law. The consumer reports or investigative consumer reports may contain information regarding your criminal records, driving history records, social security traces. You are hereby notified that you have the right to make a timely request for the nature and scope of any investigative consumer report. You are further notified that, prior to being denied placement based in whole or in part on information obtained in the consumer report, you will be provided a copy of the report, the name, address and telephone number of the consumer reporting agency and a description in writing of your rights under the Fair Credit Reporting Act. Inquiries to **TRAK-1 TECHNOLOGY** should be directed to: **Trak-1 Technology; Consumer Disputes; P.O. Box 52028; Tulsa, Oklahoma, 74152. 1 (800) 600 – 8999.**

AUTHORIZATION

I hereby authorize, without reservation, the obtaining of “consumer reports” or “investigative consumer” reports by Dunwoody United Methodist Church at any time after receipt of this authorization and throughout my placement, if applicable. I further authorize and request, without reservation, any present or former employer, school, police department, state or federal agency, financial institution, division of motor vehicles, consumer reporting agencies, or other persons or agencies having knowledge about me to furnish Trak-1 Technology or Dunwoody UMC with any and all background information in their possession regarding me, so that my qualifications may be evaluated and/or reassessed. I also agree that a fax or photocopy of this authorization with my signature should have the same authority as the original.

By signing below, I certify: (1) that I have read and fully understand this disclosure and authorization; (2) that all of the information I am providing is true, complete, correct and accurate; and (3) that I have received the attached Summary of Your Rights under the Fair Credit Reporting Act (15 U.S.C. §1681 et seq.).

The following is information required in order for Dunwoody UMC to obtain a complete consumer report:

FULL LEGAL NAME (First, Full Middle Name, Last Name)

STREET ADDRESS

CITY STATE ZIP

SOCIAL SECURITY NUMBER DATE OF BIRTH *

DRIVER’S LICENSE NUMBER (if driving minors) ISSUING STATE

OTHER OR FORMER NAMES (AKA, Maiden Names, Married Names, Surnames, Etc.)

CONSUMER’S SIGNATURE DATE

* This information will be used for background screening purposes only.