

Personal Security Concepts

3116 Capital Circle NE, Ste 3 Tallahassee, FL 32308 Phone: (850) 656-9400 Email: OLNFL@yahoo.com

INCLUSION CAFÉ - VOLUNTEER INQUIRY RELEASE

In conjunction with my application for volunteering (including contract services) with you, my prospective employer, I understand that you intend to hire Personal Security Concepts (herein called "PSC") to obtain Consumer Reports and/or investigative Consumer Reports (herein called "Reports") about me as defined in the Fair Credit Reporting Act (FCRA). These Reports may include information concerning my credit worthiness, credit standing, credit capacity, character, academic background, credentials, work habits, work performance, work experience, reasons for work termination, general reputation, personal characteristics or mode of living. You also may seek information concerning my employment history, worker's compensation history, motor vehicle record, education background, civil litigation history and/or criminal record.

I understand that you may rely on any or all of the above referenced information in determining whether to extend an offer to volunteer to me. If you contemplate making an adverse volunteer-related decision that will affect me based in whole or part upon a Report obtained from PSC, I will be provided with a copy of the Report and a written summary of my Consumer Rights under the FCRA before you finalize that decision.

Signature: _____ Date: _____

THE FOLLOWING INFORMATION IS REQUIRED TO CONDUCT THE BACKGROUND INVESTIGATION

LAST NAME : _____ FIRST NAME: _____

MIDDLE NAME: _____ SSN#: _____ --- _____ --- _____

PHONE NUMBER: _____ DATE OF BIRTH: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

DRIVER'S LICENSE NUMBER: _____ STATE ISSUED: _____

List states and counties of residence, other than above, for the past seven (7) years:

COUNTY: _____ STATE: _____ , COUNTY: _____ STATE: _____ , COUNTY: _____ STATE: _____

FOR IDENTIFICATION PURPOSES ONLY: Date OF Birth _____ Sex _____ Race _____

My prospective employer recognizes that age, sex and race are protected characteristics and that the information requested will not be used as the basis for any volunteering decision.

***** PERSONAL SECURITY CONCEPTS OFFICE USE ONLY *****

Company Name: _____ INCLUSION CAFE _____

Account Type: ___SELF-PAY \$20 per Volunteer___ Invoice#: _____

Initials: _____ Email Results to: **BILLSCHACK@COMCAST.NET**

FAIR CREDIT REPORTING ACT DISCLOSURE INQUIRY RELEASE

In conjunction with my application for volunteering (including contract services) with you, my prospective employer, I understand that you intend to hire Personal Security Concepts (herein called "PSC") to obtain Consumer Reports and/or investigative Consumer Reports (herein called "Reports") about me as defined in the Fair Credit Reporting Act (FCRA). These Reports may include information concerning my credit worthiness, credit standing, credit capacity, character, academic background, credentials, work habits, work performance, work experience, reasons for work termination, general reputation, personal characteristics, or mode of living. You also may seek information concerning my employment history, worker's compensation history, motor vehicle record, education background, civil litigation history and/or criminal record.

I understand that you may rely on any or all of the above referenced information in determining whether to extend an offer to volunteer to me. If you contemplate making an adverse volunteer-related decision that will affect me based in whole or part upon a Report obtained from PSC, I will be provided with a copy of the Report and a written summary of my Consumer Rights under the FCRA before you finalize that decision.

I have read the above disclosure and I hereby authorize you, Personal Security Concepts, or its authorized agents to obtain the above referenced information on me. I also authorize all agencies, bureaus, employers, information service organizations and individuals to provide any of the above referenced knowledge or information they have concerning me. If I am hired, this authorization shall remain on file and shall serve as an ongoing authorization for you to obtain Reports about me from PSC at any time during my volunteer time with you. A photocopy or facsimile of this authorization shall be as valid as the original. I agree that any and all disputes arising from this Report shall be brought only in state or federal court in the State of Ohio and shall be governed by, and construed in accordance with the laws of the State of Ohio.

Print Name: _____

Signature: _____

Date: _____

THIS FORM IS FOR PERMANENT RETENTION IN PERSONNEL FILE