

BACKGROUND SCREENING AUTHORIZATION/CONSENT

During the application process and at any time during the tenure of my volunteer service with Cornell Cooperative Extension, Schenectady County I hereby authorize LexisNexis Screening Solutions, Inc. on behalf of Cornell Cooperative Extension Schenectady County to procure a consumer report (known as an investigative consumer report in California) which I understand may include information regarding my character, general reputation, or personal characteristics. This report may be compiled with information from courts record repositories, departments of motor vehicles, past or present employers and educational institutions, governmental occupational licensing or registration entities, business or personal references, and any other source required to verify information that I have voluntarily supplied. I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification; to the extent such investigation includes information bearing on my character, general reputation, or personal characteristics.

AUTHORIZATION RELEASE. I certify receipt of this notice, the attached "Summary of Your Rights Under the Fair Credit Reporting Act," and a copy of the New York Corrections Law Article 23-A. I hereby give my permission for the Cornell Cooperative Extension and its agents to verify information submitted by me and to conduct a background investigation on me. I understand this may include information verification, criminal history, driving history, a credit report, past employment information, education history, license/certification verification, reference checks and/or any other public records. I authorize the complete release of these records. Such verification shall not constitute a violation of my right to privacy in any manner, and I hereby release the Cornell Cooperative Extension and its agents from all liability whatsoever for actions related to this information. I understand that the sole purpose for obtaining this information is for reasons related to my volunteer service. I understand that I must provide my date of birth for the background investigation, and acknowledge that my date of birth will not affect any hiring or other employment decision.

Applicant Legal Name (please print)

Signature

_____-_____-_____
Social Security Number *

Date of Birth*

Street Address

City, State, Zip

Phone

Date

* For identification purposes only

NY residents. Upon written request, you will be informed whether or not a consumer report was requested, and if such a report was requested, the name and address of the consumer reporting agency furnishing the report. You may inspect and receive a copy of the report by contacting that agency.

MN & Oklahoma Residents please note: In connection with your application for employment/service, your consumer report may be obtained and reviewed. Under Minnesota and Oklahoma law, you have a right to receive a free copy of your consumer report by checking the appropriate box below.

YES, I am a Minnesota resident and would like a free copy of my consumer report.

YES, I am an Oklahoma resident and would like a free copy of my consumer report.

CA Residents please note: Under CA law, you have a right to receive a free copy of your report by checking the appropriate box below.

YES, I am a California resident and would like a free copy of my investigative consumer report.

Printed Name _____

Street Address _____ City, State, Zip _____

We are required to provide applicant/employee with a copy of NY Correction Law, Article 23-A. A conviction record will not necessarily be a bar to employment. Factors such as job relatedness, age at the time of the offense, the type of offense, and rehabilitation will be taken into account.

BACKGROUND VERIFICATION DISCLOSURE

This is used to inform you that a consumer report is being obtained from a consumer reporting agency for the purpose of evaluating you for employment, volunteer service or a contracted position, including retention as an employee, volunteer or independent contractor.

This report may contain information bearing on your character, general reputation, and personal characteristics from public or private record sources.

California Notice:

You have the right under Section 1786.22 of the California Civil Code to contact LexisNexis during normal business hours to obtain your file for your review. You may obtain such information as follows:

1. In person at the LexisNexis office at the address listed above. You will need to furnish proper identification prior to receiving your file. You may have someone accompany you and should inform such person that they will also have to present reasonable identification. If you want LexisNexis to disclose to or discuss your information with this third party, you may be required to provide a written statement granting ChoicePoint permission to do so.
2. By certified mail, if you make a written request (and provide proper identification) to have your file sent to a specified addressee.
3. By telephone, if you have previously made a written request and provided proper identification.

LexisNexis has trained personnel to explain any information that is furnished to you and to explain any information that is coded.

Employer please note: If consumer checks "YES" regarding the full consumer report, and consumer resides in California, you will need to provide the individual with a copy of their consumer report.