

**NOTICE/AUTHORIZATION AND RELEASE FOR THE PROCUREMENT OF A
CONSUMER AND/OR INVESTIGATIVE CONSUMER REPORT**

I, the undersigned consumer, do hereby authorize **Tift County** by and through its Human Resources Department and/or Recreation Department to procure a consumer report and/or investigative consumer report including but not limited to a GCIC Background Check on me. I understand that this authorization and release shall be valid for subsequent consumer and/or investigative consumer reports during my period of employment and/or volunteer service with **Tift County**.

These above-mentioned reports may include, but are not limited to, information as to my character, general reputation, and personal characteristics, discerned through employment and education verifications; personal references; personal interviews; my personal credit history based on reports from any credit bureau; my driving history, including any traffic citations; a social security number verification; present and former addresses; criminal and civil history/records; any other public record. I understand that I have a right to; (1) obtain a copy of any background check report, and (2) challenge the accuracy and completeness of any information contained in any such report. I also understand that I may be required to submit a classifiable fingerprint card should an initial records check reveal that I have been convicted of, arrested for, or that I am currently charged with any of the enumerated offenses herein.

I further authorize any person, business entity or governmental agency who may have information relevant to the above to disclose the same to **Tift County** including, but not limited to any and all courts, public agencies, law enforcement agencies and credit bureaus, regardless of whether such person, business entity or governmental agency compiled the information itself or received it from other sources.

Check enumerated offenses listed below if you or any member of your immediate family HAVE BEEN arrested for, convicted of, or currently charged with any of the following:

- Simple or Aggravated battery where the victim is a minor.
- Cruelty to children, contributing to the delinquency of a minor.
- Any sexual offense
- Violation of any Controlled Substance Act or Alcohol Related Violations.
- Murder or Felony Murder.
- Criminal attempt to commit any above named offense.
- Any other crime that bears upon his/her fitness to have responsibility for safety and well being of children .

I understand that I am entitled to a complete and accurate disclosure of the nature and scope of any investigative consumer report of which I am the subject upon my written request to **Tift County**, if such is made within a reasonable time after the date hereof. I also understand that I may receive a written summary of my rights under 15 U.S.C. § 1681et. seq.

Signature: _____ Date: _____

**IDENTIFYING INFORMATION FOR BACKGROUND CHECK AND/OR CONSUMER REPORTING AGENCY
(PLEASE PRINT OR TYPE)**

SOCIAL SECURITY NUMBER* DRIVER'S LICENSE NUMBER STATE DATE OF BIRTH* GENDER* (M or F)

TYPE OR PRINT NAME (last, first, middle initial) OTHER NAMES USED (alias, maiden, nickname) YEARS USED

CURRENT ADDRESS

STREET/P.O. BOX CITY STATE ZIP COUNTY DATES LIVING HERE

PLEASE LIST ALL ADDRESSES FOR LAST SEVEN (7) YEARS (If you need additional space please use the back of this form)

STREET/P.O. BOX CITY STATE ZIP COUNTY DATES LIVED HERE

STREET/P.O. BOX CITY STATE ZIP COUNTY DATES LIVED HERE

STREET/P.O. BOX CITY STATE ZIP COUNTY DATES LIVED HERE

STREET/P.O. BOX CITY STATE ZIP COUNTY DATES LIVED HERE

****Without this information, we will be unable to properly identify you in the event we find adverse information during the course of our background investigation.***