



**Windborne United Methodist Preschool**  
**9121 Six Forks Rd. Raleigh, NC 27615**  
**919-342-6075**

**Employment Background Screen Authorization Form**

Please Print

Social Security Number	Last Name	First Name	Middle Name
Address (Street Number and Name)	City	County	State
Zip Code	Phone Number	Driver's License Number	and state issued
Date of Birth *	Sex *	Race*	

**\*For Identification purposes ONLY:** Windborne UM Preschool recognizes that age, sex and race are protected characteristics and that the information requested will not be used as the basis for any employment decisions.

In conjunction with my application for employment with you, my prospective employer, I understand that you intend to hire *ChoicePoint Services Inc.* to obtain "Consumer Reports" about me as defined in the Fair Credit Reporting Act (FCRA). These "Consumer Reports" may include information concerning my credit worthiness, credit standing, credit capacity, character, academic background, credentials, working habits, work performance, work experience, reasons for work termination, general reputation, personal characteristic or mode of living. You also may seek information concerning my employment history, workers' 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 in determining whether to extend an offer of employment to me. If you contemplate making an adverse employment-related decision that will affect me based, in whole or in part, upon a "Consumer Report" obtained from *ChoicePoint Services Inc.*, I will be provided with a copy of the "Consumer 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, *ChoicePoint Services Inc.* or its authorized agents to obtain the above referenced information about me. I also authorize all agencies, bureaus, employers, information service organizations and individuals to provide any of the above referenced knowledge or information concerning me. If I am hired, this authorization shall remain on file and shall serve as an ongoing authorization for you to obtain "*Consumer Reports about me from ChoicePoint Services Inc.*" at any time during my employment with you. A photocopy or facsimile of this authorization shall be as valid as the original.

The consumer Reporting Agency that will prepare the report:  
 ChoicePoint Services Inc  
 1000 Alpharetta, GA 30005

Signature \_\_\_\_\_ Date \_\_\_\_\_