

DISCLOSURE REGARDING CONSUMER REPORT AND/OR INVESTIGATION

I hereby authorize **Cleveland Sight Center** - (hereafter referred to as "Client") and or its agent, including but not limited to The Pre-Check Company (hereafter referred to as "consumer reporting agency"), to investigate my background now and any time in the future for volunteer/contractual services purposes.

I understand that the consumer reporting agency will conduct investigations to obtain information as deemed necessary for volunteer/contractual services purposes. The information obtained may include an "investigative consumer report" into the last seven (7) years of my credit background and beyond seven (7) years regarding my past employment, work habits, salary history, education, criminal background (when applicable according to state and federal laws), motor vehicle history, any and all workers' compensation history, civil records, use of illegal substances and alcohol abuse, personal characteristics, mode of living and general reputation. Pre-Check will not disclose any information regarding arrest records past (7) years or conviction records that have been expunged or sealed.

I understand that any direct or indirect contact with former employers, schools, financial institutions, landlords and public agencies may be made, and that personal interviews with my associates, friends, acquaintances, neighbors, or other persons who may have such knowledge may be held to obtain such information.

I understand that any consumer report or investigative consumer report requested will be used strictly for "volunteer/contractual services purposes," as defined under §603(h) and authorized under §604(a)(3)(B) of the Fair Credit Reporting Act, 15 U.S.C. § 1981, *et seq.*, as a report to be used for the purpose of evaluation for volunteer/contractual servicesism. I further understand and consent to the furnishing of workers' compensation information, after a conditional job offer, which may include my medical information including any and all injuries pursuant to state law and in compliance with the Federal Americans with Disabilities Act. I hereby agree to submit to a background investigation, any volunteer/contractual services and drug and alcohol testing and authorize the lab performing the test, any medical review officer who may review the results, the entity arranging for the lab test, and or the Client to release any results to parties who have a "need to know" basis for such results. A photographic or faxed copy of this form shall be as valid as the original.

I also understand that before an adverse action based on information obtained in the report will be taken, I will be provided a copy of the report and the document entitled, "Disclosure Regarding Consumer and/or Investigative Report."

I understand I may request an outline of the nature and scope of the investigation if such request is made in writing within a reasonable period after the completion of the investigation. The address of The Pre-Check Company is P.O. Box 45375, Westlake, Ohio, 44145, and its toll free telephone number is (800) 268-2435.

California applicants or employees only: By signing below, you also acknowledge receipt of A SUMMARY OF YOUR RIGHTS UNDER THE PROVISIONS OF CALIFORNIA CIVILCODE §1786.22.

Please check the appropriate box below if you would like to receive a copy of your investigative consumer report at no charge.

Minnesota and Oklahoma applicants or employees only: Please check the appropriate box below if you would like your consumer report at no charge.

New York and Maine applicants or employees only: You have the right to inspect and receive a copy of any investigative consumer report requested by **Client** by contacting the consumer reporting agency identified above directly. You may also contact the Client to request the name, address and telephone number of the nearest unit of the consumer reporting agency designated to handle inquiries, which the Client shall provide within 5 days.

New York applicants or employees only: Upon request, you will be informed whether or not a consumer report was requested by **Client**, and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. By signing the authorization, you also acknowledge receipt of Article 23-A of the New York Correction Law.

Oregon applicants or employees only: Information describing your rights under federal and Oregon law regarding consumer identity theft protection, the storage and disposal of your credit information, and remedies available should you suspect or find that the Client has not maintained secured records is available to you upon request.

Washington State applicants or employees only: You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act, Wash. Rev. Code, Chapter 19.182

PRE-CHECK APPLICANT RELEASE

Cleveland Sight Center

I understand that by signing my name below, that I am signing the Authorization form directing the background check as described below, and I certify that:

- I have received the Disclosure Regarding Consumer and/or Investigative Report (page 1 of 2), have read and received the Summary of Your Rights, and if a California resident/applicant, the document entitled, "A Summary of Your Rights Under the Provisions of California Civil Code §1786.22."
- I understand that my signature now and throughout this process will be binding. Additionally, notices, documents, and communications may be provided electronically and will meet the requirements set forth under Federal and/or State law, as permitted by law. I agree that a facsimile ("fax"), electronic or printout of this authorization may be accepted with the same authority as the original.
- I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by **The Pre-Check Company** at any time after receipt of this authorization and throughout my time of service, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, local, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information including an "investigative consumer report" into the last seven (7) years of my credit background and beyond seven (7) years regarding my past employment, work habits, salary history, education, criminal background, motor vehicle history, any and all workers' compensation history, civil records, use of illegal substances and alcohol abuse, personal characteristics, mode of living and general reputation.

For **California, Oklahoma, or Minnesota** employees and applicants: Please check the appropriate box to indicate if you would like to receive a copy of your consumer report free of charge. Yes No

PLEASE FILL IN EACH BLANK SPACE:			
NAME:		PHONE	
FORMER NAME:		SOCIAL SECURITY #:	
CURRENT ADDRESS:		PREVIOUS ADDRESS:	
CITY:		CITY:	
STATE:	ZIP:	STATE:	ZIP:
COUNTY:		COUNTY:	
LENGTH OF RESIDENCE:	Years:____ Months: ____	LENGTH OF RESIDENCE:	Years:____ Months:____
DRIVER'S LICENSE: STATE	DL NUMBER		
DATE OF BIRTH:			
MAY WE CONTACT YOUR CURRENT EMPLOYER? ____ YES ____ NO ____ N/A			
In addition to authorizing the background investigation, I declare under penalty of perjury that the foregoing is true and correct, and I understand that if engaged by Neighborhood Family Practice, false or incomplete statements of material fact on this authorization shall be sufficient cause for dismissal.			

DATE _____ SIGNATURE _____

Cleveland Sight Center is an equal opportunity not for profit and does not discriminate against applicants or employees on the basis of race, color, religion, gender, gender identity, sexual orientation, marital or civil status, age, national origin, disability, or veteran status.

Client Account #2223