

**Notice/Authorization and Release for the Procurement
of an Investigative Consumer Report for a Prospective Employee**

I, the undersigned consumer, do hereby authorize Paris Junior College, 2400 Clarksville Street, Paris, TX 75460, to procure an investigative consumer report on me pending an offer of employment. I understand that this authorization and release shall be valid for subsequent investigative consumer reports during my period of employment with Paris Junior College. This report may include, but is not limited to, the following searches: Employment and Education Verifications; Personal References, Personal Interviews, E-Verify (U.S. Department of Homeland Security), Criminal Records Search (7 years of residency history or up to 5 criminal searches), National Law Enforcement Submissions, and Sexual Offender Registry. A Motor Vehicle Report will be conducted on all individuals who will drive company vehicles or who will drive as part of the job.

I further authorize any person, business entity or government agency who may have information relevant to the above to disclose the same to Paris Junior College, including, but not limited to any and all courts, public agencies, law enforcement agencies or credit bureaus, regardless of whether such person, business entity or governmental agency compiled the information itself or received it from other sources. 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 Paris Junior College, 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. &1681 et.seq.

Signature: _____ Date: _____

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Identifying Information for Investigative Consumer Reporting Agency
(Please print or type)

Social Security Number _____
Driver's License Number _____
State _____
Date of Birth _____
Gender (male/female)

Full Name (last, first, middle) _____
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 living here

Street/P O Box _____
City _____
State _____
Zip _____
County _____
Dates living here

Street/P O Box _____
City _____
State _____
Zip _____
County _____
Dates living here

Education:

Institution Name _____
Institution Address (City and State) _____
Date Graduated _____
Degree Obtained

Institution Name _____
Institution Address (City and State) _____
Date Graduated _____
Degree Obtained