DEPARTMENT/PERSON REQUESTING BACKGROUND CHECK
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## AGREEMENT, AUTHORIZATION, AND CONSENT FOR RELEASE OF BACKGROUND INFORMATION

## PLEASE TYPE OR PRINT

I, LAST NAME		FIRST NAME	MIDDLE NAM	E	(PLEASE INCLUD	E Jr., Sr., II, III Etc.)	
reassignment, and/ agency to research character, profession Community & Tec	for retention and verify to come standing holes	("Work"), Kentucky Corr ne information I have pro , work history and qualific ge System. Kentucky C	oloyment, work to be perfor nmunity & Technical Col vided on my application fo cations. This agency will p Community & Technical Corelated background investion	lege System or employment provide a writte College Syste	will use the ser including my pe en report of its fir	vices of an outside rsonal background, ndings to <b>Kentucky</b>	
current and former professional and p Americans with Dis	employers, personal refe abilities Act.	department of motor veh rences and workers con I agree, authorize and cor	t deems appropriate including including the records, military recompensation records including the release and district College System, and Ak	rds, credit rep ling any and sclosure of any	orting agencies, all injuries in o	education records, ompliance with the	
I agree, authorize and consent to the procurement of a Consumer Report and/or an Investigative Consumer Report and understand that it may contain information about my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living. This authorization in original or copy form shall be valid for my term of Work from the date indicated next to my signature. According to the Fair Credit Reporting Act, I will be notified by <b>Kentucky Community &amp; Technical College System</b> if Work is denied because of information obtained from a Consumer Reporting Agency. Additionally, I understand that if requested within 60 days, I will be given a full and accurate disclosure as to the nature and substance of all information provided to <b>Kentucky Community &amp; Technical College System</b> . I further understand that I may request a copy of the report, and that when doing so, proper identification will be required and I should direct my request to: <b>AbsoluteHire</b> , 3009 Douglas Blvd., 3 <sup>rd</sup> Floor, Roseville, CA 95661. I understand that residents of all states will automatically receive a copy of the report if an adverse action is taken regarding the employment application, or upon request as outlined herein.							
LAW ENFORCEMENT AGENCIES AND OTHER ENTITIES FOR POSITIVE IDENTIFICATION PURPOSES REQUIRE THE FOLLOWING INFORMATION WHEN CHECKING PUBLIC RECORDS. IT IS CONFIDENTIAL AND WILL NOT BE USED FOR ANY OTHER PURPOSES. PLEASE PRINT CLEARLY.							
Signed			Today's Date				
Name as it appears on your driver's license			Position Applied For			_	
Social Security Number / / Date of Birth			Driver's License Number State			_	
Other names you have used, or are also known as, including maiden name, name changes and any aliases:							
PLEASE PROVIDE ALL RESIDENTIAL ADDRESSES FOR THE PAST 7 YEARS Mo./Yr. / Mo./Yr							
Current Address							
	Street	Apt.#	City	State	Zip Code	From / To?	
Former Address		Apt.#	C:tv	Ctata	Zip Code	/ From / To?	
	Street	<b>Ар</b> і.#	City	State	Zip Code	FIOIII/ 10?	
Former Address	: Street	Apt.#	City	State	Zip Code	/ From / To?	

City

State

Zip Code

From / To?

Former Address:

Street

Apt.#