



## **DISCLOSURE REGARDING CONSUMER REPORTS**

### **Mount Hermon Association, Inc. Will Obtain a Background Check**

You acknowledge and understand that in connection with your application for employment with Mount Hermon Association, Inc. (“MHA”), including any independent contract for services or when deciding whether to modify or continue your ongoing employment, if hired, we may obtain a “consumer report” and/or an “investigative consumer report” on you from IntelliCorp, a consumer reporting agency, or from any third party, in strict compliance with both state and federal law.

### **Consumer Report Defined**

A consumer report is any communication of information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used for purposes of serving as a factor in establishing your current and/or continuing eligibility for employment purposes. A common term for a consumer report is a “background check report.”

### **Investigate Consumer Report Defined**

An investigative consumer report is obtained through personal interviews with individuals who may have knowledge of your character, general reputation, personal characteristics, or mode of living. An investigative consumer report might include, for example, calls or emails to the personal references you provide or conversations with former supervisors or colleagues where you work or have previously worked.

### **Report May Contain**

The consumer reports or investigative consumer reports may contain public record information which may be requested or made on you including, but not limited to: consumer credit, criminal records, civil cases in which you have been involved, driving history records, current motor vehicle insurance coverage information, education records, previous employment history, workers compensation claims history, social security traces, military records, professional licensure records, eviction records, drug testing, government records, and others.

You further understand that these reports may include experience information along with reasons for termination of past employment. You also acknowledge and understand that information from various federal, state, local and other agencies which contain information about your past activities will be requested, and that a consumer report containing injury and illness, drug testing, or other medical records and medical information may be obtained only after a tentative offer of employment has been made.

### **Your Rights as a Consumer**

You are hereby notified that you have the right to make a timely request for a copy of the scope and nature of the above investigative background report and/or a complete copy of your consumer report contained in MHA files on you at the time of your request by providing proper identification.

You are further notified that, prior to being denied employment based in whole or in part on information obtained in the consumer report, you will be provided a copy of the report, the name, address and telephone number of the consumer reporting agency and a description in writing of your rights under the Fair Credit Reporting Act. Correspondence to MHA should be forwarded to:

Mount Hermon Association, Inc.  
Human Resources  
PO Box 413, Mount Hermon, CA 95041  
phone 831.430.1229

# AUTHORIZATION TO OBTAIN CONSUMER REPORT

The following is information required in order for Mount Hermon Association, Inc. to obtain a complete consumer report:

Full Legal Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Gender\*: M / F Race\*: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Other or Former Names: (AKA, Maiden Names, Married Names, Surnames, Etc.) \_\_\_\_\_

**Your signature below indicates the following:**

- 1) You authorize, without reservation, MHA or any third party to obtain and/or furnish to MHA any records or information referenced in the provided disclosure statement for employment related purposes;
- 2) You authorize ongoing procurement of any records or information, reports and records at any time during your employment to the extent allowed by law;
- 3) You authorize the use of a fax, photocopy, or scanned version of this authorization as having the same authority as the original;
- 4) You authorize and request, without reservation, any present or former employer, school, police department, financial institution, division of motor vehicles, consumer reporting agency, or other entity, person or agency having knowledge about you to furnish MHA with any and all background information in their possession regarding you for these stated employment purposes;
- 5) You understand and agree that in connection with your employment your consumer report information, whether investigative or otherwise, may be shared with and/or reviewed by all applicable parties involved in the hiring process; however, please note that MHA will use appropriate discretion to protect your privacy;
- 6) You have read and fully understand the foregoing disclosure and this authorization.
- 7) You certify that all the information you have provided on this form is true, complete, correct and accurate; and
- 8) You certify you have received, reviewed and understand the "Summary of Your Rights under the Fair Credit Reporting Act (15 U.S.C. §1681 et seq.)" which is published by the Federal Trade Commission to help you know your rights.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*\*This information will be used for background screening purposes only.*

**Check this box if you** would like to receive a copy of your consumer report, if one is obtained. A copy of your report will be sent to you by the above-referenced employer within three business days beginning on the date of receipt by the employer.

Pursuant to §1786.22 of the California Civil Code, you may view the file maintained on you by MHA during normal business hours. You may also obtain a copy of certain documents in this file, either in person or by mail, by submitting proper identification and paying the costs of duplication services. You may also receive a summary of the file by telephone upon production of adequate identification. MHA is required to have trained personnel available to explain your file to you and any coded information contained therein. You may appear in person alone, or with another person of your choice, provided that this additional person furnishes proper identification.

California Civil Code section 1786.16(2) requires a separate disclosure and authorization to be signed by an applicant or current employee each time a background check is performed for employment purposes. This requirement does not apply in situations where the employer has a suspicion of wrongdoing or misconduct by a current employee.