

## Trinity Lutheran School

*Information below is being used for background screening purposes only.								
PLEASE PRINT LEGIBLY								
Applicant's Legal Name (full name)	First:		Middle:		Last:			
Alias or Maiden Name	First:	Middle:		Last:				
Home Address:	Street Address:			State:	Zip:			
APPLICANT INFORMATION								
Date of Birth:				Social Security Number:				
Phone Number:				Email Address:				
Driver's License Number: State of Issu			nance: Names as it Appears on Driver's License:					
Eye Color:	Hair Color: Race		e:	Weight:			Height:	
							in.	
VOLUNTEERING INFORMATION								
School/Place: Purpose:								
Trinity Lutheran School				VolunteerVolunteer				
				Only			and Driver	
APPLICANT SIGNATURE AND DATE								
Signature (if under the age of 18, parent/guardian signature is required):  Date:								



# Trinity Lutheran School Volunteer Screening Form

#### DISCLOSURE AND AUTHORIZATION FOR CONSUMER REPORTS

#### **Disclosure**

Trinity Lutheran School has contracted with Bushue Background Screening in connection with my application for employment (including contract or volunteer services), I understand consumer reports will be requested by you ("End-User"). These reports may include, as allowed by law, the following types of information, as applicable: names and dates of previous employers, work experience, education, accidents, licensure, credit (as allowed by law – where required, you will be presented with additional disclosures), etc. I further understand that such reports may contain public record information such as, but not limited to: my driving record, judgments, evictions, criminal records, etc., from federal, state, and other agencies that maintain such records. If I am hired, I understand that my employer can use this disclosure and authorization to continue to obtain such consumer reports throughout my employment, contract period or volunteer service.

### **Authorization** , hereby authorize procurement of consumer report(s) and investigative consumer report(s) by End-User. If hired (or contracted), this authorization shall remain on file and shall serve as ongoing authorization for End-User to procure such reports at any time during my employment, contract, or volunteer period. I authorize without reservation, any person, business or agency contacted by the consumer reporting agency to furnish the above-mentioned information. This authorization is conditioned upon the following representations of my rights: I understand I have the right to make a request to the consumer reporting agency: Bushue Human Resources, Inc. d/b/a Bushue Background Screening ("Agency"), 302 East Jefferson Avenue, Suite B, Effingham, IL 62401, telephone number (217) 342-3042 or toll free at (877) 342-3042, upon proper identification, to obtain copies of any reports furnished to End-User by the Agency and to request the nature and substance of all information in its files on me at the time of my request, including the sources of information, and the Agency, on End-User's behalf, will provide a complete and accurate disclosure of the nature and scope of the investigation covered by any investigative consumer report(s). The Agency will also disclose the recipients of any such reports on me which the Agency has previously furnished within the two year period for employment requests, and one year for other purposes preceding my request (California three years). I hereby consent to End-User obtaining the above information from the Agency. I understand that I can dispute, at any time, any information that is inaccurate in any type of report with the Agency. I may view the Agency's privacy policy at their website: www.bushuebackgroundscreening.com.

I understand that I have rights under the Fair Credit Reporting Act, and I acknowledge receipt of the Summary of Rights (initials).