

## Written Disclosure to Applicant and Consent to Request Consumer Report Information

Position Applicant has Applied to: \_\_\_\_\_

Requesting Supervisor: \_\_\_\_\_

I understand that BVCAA, Inc. will utilize the services of a consumer reporting agency as part of the procedure for processing my application for employment. I also understand if my application for employment is granted, BVCAA, Inc. will obtain further information through subsequent investigations by a consumer reporting agency so as to update, renew or extend my employment.

I understand a consumer reporting agency's investigation may include obtaining information covering up to the last seven years, regarding my:

- credit background
- criminal conviction/sex offender background
- motor vehicle record consistent with federal and state law
- Clinical Employees Only – Department of Health and Human Services Office of Inspector General Exclusion list and the General Services Administration List of Parties Excluded from Federal Programs

I understand that before I am denied employment based, in whole or part, on information obtained in the report, I will be provided a copy of the report and a description in writing of my rights under the Fair Credit Reporting Act.

I understand if I disagree with the accuracy of any information in the report, I must notify BVCAA, Inc. within two business days of my receipt of the report. If I notify BVCAA, Inc. within two business days of the receipt of the report that I am challenging information in the report, BVCAA, Inc. will not make a final decision on the adverse action until after I have had reasonable opportunity to address the information contained in the report.

I hereby consent to this investigation and authorize BVCAA, Inc. to procure a report on my background as stated above from a consumer reporting agency.

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### **APPLICANT: PLEASE COMPLETE THE FOLLOWING**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

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Please print full name

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Please include any alias' names or any also known as names

\_\_\_\_\_  
Driver's License Number

\_\_\_\_\_  
State

\_\_\_\_\_  
Print name as it appears on license