DISCLOSURE AND AUTHORIZATION FORM
TO OBTAIN CONSUMER REPORTS FOR VOLUNTEER PURPOSES

Please Read Carefully Before Signing the Authorization

DISCLOSURE

In considering you for volunteering and, if you are a volunteer, in considering you for subsequent promotion, assignment, reassignment, retention, or discipline, [The College of Charleston] (“the Company”) may request and rely upon one or more consumer reports or investigative consumer reports about you that we obtain from a consumer reporting agency, such as Surveillance, Resources and Investigations, LLC.

Surveillance, Resources and Investigations, can be contacted by mail at 109 Lovett Dr; Greenville, SC 29607; or phone: 1-855-581-0937 or website: www.srandi.com.

For explanation purposes:

- a “consumer report” is a written, oral or other communication of any 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 or collected in whole or in part for the purpose of serving as a factor in making a volunteering-related decision about you. Such information may include, for example, credit information, criminal history reports, or driving records; and

- an “investigative consumer report” is a consumer report in which information on your character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with your prior employers, neighbors, friends, or associates, or with others who may have knowledge concerning any such items of information. In the event an investigative consumer report is requested about you, you are entitled to additional disclosures regarding the nature and scope of the investigation requested, as well as a written summary of your rights under the Fair Credit Reporting Act (“FCRA”).

Under the FCRA, before the Company can obtain a consumer report or investigative consumer report about you for volunteering purposes, we must have your written authorization. Before we take adverse action on the basis, in whole or in part, of information in that report, you will be provided a copy of that report, the name, address, and telephone number of the consumer reporting agency, and a summary of your rights under the FCRA.

[End of Background Check Disclosures.]
Applicant- Complete the following information as accurately as possible.

Last: ___________________________ First: ___________________________ MI: ____________

SSN*: ___________________________ DL#: ___________________________ State: ____________

Birth date*: ___________________________ Phone: ___________________________

Other/Previous Names: ___________________________ Dates Name Used: ___________________________

Other/Previous Names: ___________________________ Dates Name Used: ___________________________

Addresses: List past seven year beginning with your current address (Attach additional sheet if necessary)

Street: _______________ City_____________ State: ___ Zip: ____ County: ___________ Dates: ____________

Street: _______________ City_____________ State: ___ Zip: ____ County: ___________ Dates: ____________

Street: _______________ City_____________ State: ___ Zip: ____ County: ___________ Dates: ____________

ACKNOWLEDGMENT AND AUTHORIZATION RELEASE FOR CONSUMER REPORT/BACKGROUND CHECK

I acknowledge receipt of the separate document DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT which are both available at https://www.srandi.com/downloads.aspx and certify that I have read and understand both of the FCRA documents. I hereby authorize the obtaining of “consumer reports” and/or “investigative consumer reports” at any time after receipt of this authorization and, if I am hired, throughout my volunteering. To this end, I hereby authorize (a) Surveillance, Resources, & Investigations “SR&I” to request information about you from any public or private information source; (b) anyone to provide information about you to SR&I; (c) SR&I to provide us (The College of Charleston) one or more reports based on that information; and (d) us to share those reports with others for legitimate business purposes related to your volunteering. SR&I may conduct a background check investigating your education, work history, professional licenses and credentials, references, address history, social security number validity, right to work, criminal record information, lawsuits, driving record, credit history, and any other information with public or private information sources. I authorize that photocopies of this authorization is as valid as the original. Authorization to be valid for as long as you are an applicant or volunteering with us.

Signature: ___________________________ Date: ____________

*This information (SSN and Birth Date) will be used for background screening purposes only and will not be taken into consideration in making any volunteering decisions.