

Wesley Manor

CRIMINAL RECORDS & BACKGROUND RELEASE AUTHORIZATION AND DISCLOSURE

PLEASE TYPE OR PRINT

I, _____
LAST NAME FIRST NAME MIDDLE NAME
(PLEASE INCLUDE Jr., Sr., II, III Etc.)

understand that Wesley Manor will seek and obtain consumer reports / investigative reports about me as defined in the Fair Credit Reporting Act (FCRA). These investigative reports may include, whichever are applicable, but are not limited to verification of Social Security Number, names and dates of previous/current employment, work experience, work habits, work performance, professional and personal references, general reputation, personal characteristics and mode of living, workers' compensation claims, criminal history records (from local, state, federal, international and other law enforcement agencies' records), sexual offender's lists, wants and warrants records, motor vehicle records, military records, educational verification, license verification, credit history, civil cases, OIG/GSA, OFAC/Patriots Act, any sanction lists, FBI finger printing and drug testing. I understand that these records may be used for the eligibility and qualification of my employment. I hereby authorize, without any reservation, the full release of these records and information for Wesley Manor and/or its designated agents or representatives to conduct the searches and investigations. I authorize the complete release of these records or data pertaining to me which an individual, company, firm, corporation, or public agency may have. This authorization and consent shall be valid in original, fax, or copy form.

If I am hired, I also authorize the full release of the information described above, without any reservation, throughout any duration of my employment at Wesley Manor. I also certify that all information provided below or on my resume and employment application is correct to the best of my knowledge. Any false statements provided on this form, my resume or employment application will be considered just cause for the termination of employment at any time. In addition, I hereby release Wesley Manor, and its agents, officials, representatives, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may at any time, result to me, my heirs, family or associates because of compliance with this authorization. Upon request, Wesley Manor will supply a copy of my reports and my rights under the FCRA. Requests may be directed to: Wesley Manor, 5012 E. Manslick Rd., Louisville KY 40219 or by contacting us at 502-969-2582.

CHECK THIS BOX if you are applying for work with a California, Minnesota or Oklahoma-based employer and you would like a copy of your Consumer Report if one is prepared in the investigation of your background. CA Codes 1785.20.5 & 1786.16(a)(5)(b)(1), MN Code 13C Subdivision 2, OK Code 24 O.S. §148

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

FIRST NAME	MIDDLE NAME	LAST NAME	ALIAS/MAIDEN NAME(S)
SOCIAL SECURITY #	DATE OF BIRTH (Mo/Day/Yr)	RACE	PLEASE CIRCLE ONE
			MALE OR FEMALE

Complete if applying for a position that may involve driving a motor vehicle.

DRIVER'S LICENSE #	STATE ISSUED	EXPIRATION DATE

List all previous addresses for the past 7 years:

ADDRESS, CITY and STATE	ZIP CODE	COUNTY	DATE FROM	DATE TO

APPLICANT SIGNATURE: _____ DATE: _____