

BACKGROUND INVESTIGATION AUTHORIZATION

I _____, hereby authorize the Shelby County Sheriff's Office, hereinafter referred to as Employer, and/or its designated agents to procure a consumer report and/or an investigative consumer report on me for the purpose of evaluating me for employment, promotion, reassignment, discipline and/or retention and to make an independent investigation of my background, references, past/present employment, education, credit, motor vehicle records, drug screening records, federal, civil, criminal and police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my application, resume, or in other supporting documentation and/or obtaining other information, including personal interviews with those acquainted with me, which may be material to my qualifications.

I understand that the Employer, and/or its designated agents will adhere to applicable state and federal statutes concerning the securing of the information, handling, and release of information obtained in the investigation. I further understand, pursuant to Section 606(b) set forth in the federal Fair Credit Reporting Act, I have the right to request additional disclosures as to the nature and scope of the investigation and will be provided a copy of the consumer rights as defined by the Federal Trade Commission. I also understand if an adverse decision is made, due to the contents of this investigative report, then pursuant to Section 604(b)(3), I will receive a free copy of the report and a summary of my rights as a consumer under the FCRA. The following is my true and complete legal name and all information on this document is true and correct to the best of my knowledge. Any falsification of the facts or omission of material facts under any circumstances, found during the investigation or at anytime thereafter, constitutes the basis for immediate disqualification as a candidate or termination of my employment. I understand that the information requested below is for the sole purpose of gathering information accurately and positive identification and will not be used to discriminate against me in violation of any law. I understand any initial offer will be contingent until all information is obtained and processed and may be subsequently withdrawn based on the results of this investigation. I further understand this signed consent hereby authorizes the Employer, and/or its designated agents, to conduct necessary, random and/or periodic background investigations as a requirement of my continued qualifications. Please provide complete legal name and complete all areas below.

I understand that I have the right to refuse participation in the investigation procedure and that my participation is totally voluntary. I understand that the completion of this form is condition and requirement of employment with the Shelby County Sheriff's Office. I also understand that if I decline to sign this form, I will not be eligible for employment with the Shelby County Sheriff's Office.

Please complete the following information:

Print Name: First, Middle (no initials), Last	Previous Names or Nicknames Used and Dates

Current Address	City/State/Zip	County	Dates of Residence

Please list past seven (7) years of residences:

Previous Address	City/State/Zip	County	Dates of Residence

Social Security Number	Date of Birth

Signature	Name (Please Print)	Date