

ALVIN COMMUNITY COLLEGE

CONSENT TO PERFORM CRIMINAL HISTORY BACKGROUND CHECK
(IN COMPLIANCE WITH THE FAIR CREDIT REPORTING ACT – FCRA)

To provide a safer, more secure workplace, criminal history background checks are now an integral part of the employment procedure. In an effort to avoid negligent hiring incidents, background checks are conducted on all candidates recommended for regular, full time positions. Alvin Community College uses First Advantage Background Services, which provides background screening services on a local and national level for this element of the employment procedure.

PLEASE PRINT / TYPE

DATE: _____ **DEPARTMENT:** _____

NAME: _____
(Last) (First) (M.I.)

(Maiden Name) (Other Last Name) (Other Last Name)

ADDRESS: _____
(Street)

(City)* (County)* (State)* (Zip)

DATE OF BIRTH: _____
(MM/DD/YYYY)** (Social Security Number)**

M F W B H API

* As shown on the original application
** To be used only for Criminal History Searches; not a part of the Personnel File

I am an applicant for employment and/or current employee with ALVIN COMMUNITY COLLEGE, and have been advised that as a part of the application / employment process, the Employer conducts a criminal history background check. By submission of this form, I consent to the Employer, use of any information provided in the application process in performing the criminal history check. The Employer has informed me that I have the right to review and challenge any negative information that would adversely impact a decision to offer employment. In addition, I have been informed that I will have a reasonable opportunity to clear up any mistaken information reported within a reasonable time frame established within the sole discretion of the Employer. Under the Fair Credit Reporting Act (FCRA), I have been advised that upon request, I will be provided the name, address and telephone number of the reporting agency, as well as the nature, substance and source of all information.

PLEASE RESPOND TO THE FOLLOWING QUESTIONS ABOUT YOUR CRIMINAL RECORD HISTORY (IF ANY). PROVIDE A DESCRIPTION/EXPLANATION FOR ANY "YES" RESPONSE.

1. Have you ever been convicted or pleaded guilty before a court of any federal, state, or municipal criminal offense? (Excluding minor traffic violations) If YES, please provide an explanation. YES NO

2. Have you ever received deferred adjudication, or similar disposition, for any federal, state or municipal criminal offense? If YES, please provide an explanation. YES NO

3. Have you ever received probation or community supervision for any federal, state or municipal criminal offense? If YES, please provide an explanation. YES NO

4. Have you ever been convicted of any criminal offense in a country outside the jurisdiction of the United States? If YES, please provide an explanation. YES NO

5. As of the date of this authorization, do you have any pending criminal charges against you? If YES, please provide an explanation. YES NO

PLEASE LIST ALL COUNTIES AND STATES OF RESIDENCE SINCE AGE 18 OR HIGH SCHOOL GRADUATION. YOU MUST BE SPECIFIC ABOUT DATES OF RESIDENCE.

CITY / TOWN	COUNTY	STATE	DATES	
			TO	FROM

I HEREBY CERTIFY THAT ALL INFORMATION PROVIDED IN THIS AUTHORIZATION IS TRUE, CORRECT AND COMPLETE. I UNDERSTAND THAT IF ANY INFORMATION PROVES TO BE INCORRECT OR INCOMPLETE THAT GROUNDS FOR THE CANCELLING OF ANY AND ALL OFFERS OF EMPLOYMENT WHICH MAY EXIST AND MAY BE USED AT THE DISCRETION OF ALVIN COMMUNITY COLLEGE.

APPLICANT SIGNATURE: _____
(KEYED NAME ACCEPTED FOR ELECTRONIC SUBMISSION)

DATE: _____