Rochester Institute of Technology (RIT)
Pre-Employment Background Check Authorization

Applicant/Employee Name_____ Job Title_____

Hiring Department_____ Hiring Supervisor_____

1. I understand that an investigative report may be generated on me that may include information as to my character, work habits, performance and experience, along with reasons for termination of past employment, financial/credit history, criminal history records from any criminal justice agency in any or all federal, state, city and county jurisdictions, state Department of Motor Vehicle/Drivers' License Records to include traffic citations and registration, military records from the National Personnel Record Center, education records including transcripts, and requests for records and information from any individual, company, firm corporation, present and/or past employers and public agencies (including the Social Security Administration and the Immigration and Naturalization Service). I fully understand that RIT and/or its agent (Securint) may be requesting information from public and private sources about any of the information noted earlier in this paragraph for the past seven years, and I freely give my consent for RIT to do so.

2. According to the Fair Credit Reporting Act (FCRA), I am entitled to know if the considerations for which I am applying are denied because of information obtained from a consumer-reporting agency. If so, I will be notified and be given the name of the agency providing the report.

3. I agree that a photocopy or telephonic facsimile of this authorization shall be valid as the original. This release is valid for most federal, state and county agencies.

I hereby authorize, without reservation, any one contacted by RIT and/or their agent Lexis Nexis/Choice Point, to furnish the information described in Section I.

_____ _____ _____
Signature **Please print full name** **Today's Date**

The following information is required by law enforcement agencies and other positive identification purposes when checking public records. It is confidential and will not be used for any other purposes.

_____ _____
Please print other names you have used **Social Security Number –*REQUIRED*-**. Your SS# will only be used to confirm your identity for purposes of completing an accurate background investigation.

_____
Date of Birth –*REQUIRED*- The Age Discrimination Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age. Your date of birth is required on this form to confirm your identity for purposes of completing an accurate background investigation, and is not provided to the hiring official for any purpose in connection with consideration of your application for employment.

_____
Current Home Address **City** **State** **Zip**

_____
Previous Home Address **City** **State** **Zip**

_____
Driver's License Number and State **Name as it appears on License**

Updated 04/2009