

Foothills Gateway, Inc. Background Check Release of Information Authorization

In order to provide a safe environment, Foothills Gateway, Inc. conducts background checks for all independent contractors, volunteers, “Approved Supervisor” and employees (new and current). We require all independent contractors, volunteers, “Approved Supervisors” and employees to complete a Colorado Bureau of Investigation (CBI) background check. Anyone having lived in other states within the last seven years will also complete a background check for that state/s.

1. I understand that an investigative background check involving felony convictions will be performed. I understand that as directed by state requirements and consistent with the job or role description, Foothills Gateway, Inc. will be requesting information from public and private sources concerning my court record.

2. I acknowledge that a telephonic facsimile (fax) or photographic copy of this signed Authorization shall be valid as the original.

3. I am interested in being an *independent contractor, volunteer, “Approved Supervisor” or employee* of Foothills Gateway, Inc. and desire that the agency be informed as to my background and qualifications, including my criminal and driving record. I hereby authorize Foothills Gateway, Inc. to investigate my past record to ascertain any and all information that may be relevant to the position for which I am applying. By signing this Release of Information Authorization, I authorize governmental entities, law enforcement agencies and all other such persons or entities to furnish the information described herein and release all such persons or entities from any claim or charge because of the furnishing of such information, unless that information is false.

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

Please print your full legal name:

(Last) (First) (Middle)

Please print any other names you have used:

Home address:

City: _____ State: _____ Zip Code: _____

Have you lived in Colorado for the past seven years? _____yes _____no

If you answered "No" to the above question, you must read and sign the "Fair Credit Reporting Act Disclosure and Authorization". Then please list below all mailing addresses you have had in the past seven years.

Social security number: _____ - _____ - _____ Date of Birth _____

I verify that the above statements I have made are accurate and complete.

Signature:

_____ Date: _____
Month Day Year