



PERMISSION TO OBTAIN BACKGROUND CHECK

I, the undersigned applicant (also known as “consumer”), authorize Ovilla Christian School through its independent contractor, First Advantage, to procure background information (also known as a “consumer report and/or investigative consumer report”) about me. This report may include my driving history, including any traffic citations; a social security number verification; present and former addresses, criminal and civil history/record; and the state sex offender records.

I understand that I am entitled to a complete copy of any background information report of which I am the subject upon my request to Ovilla Christian School, if such is made within a reasonable time for the date it was produced. I also understand that I may receive a written summary of my rights under the Fair Credit Reporting Act.

A \$10 fee will be charged to your FACTS account upon submission of this form.

A background check is valid for 2 years.

Signature _____ Date _____

Name _____
First Middle Last

Other Names Used (alias, Maiden, nickname, etc.) _____

Date of Birth (mm/dd/yyyy) _____ Social Security No. _____

Driver's License No. _____

Current Address _____

City _____ ST _____ Zip _____

If in current address for less than one year:

Former Address _____

City _____ ST _____ Zip _____

Reason for Background Check: **Field Trip** **Volunteer**

Relationship to student: _____

Student's Name: _____

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For Office Use Only

Approval Date _____ Denial Date _____

Submitted Date _____ ID # _____