

# Background Check Notice and Authorization

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This notice is to inform you that we will be conducting a pre-employment background investigation in conjunction with your application for employment with our company. This background investigation may involve verifying or reviewing any of the following relevant information:

- Social Security number
- Driving record
- Criminal convictions
- Prior employment history
- Educational history

As part of this investigation, The Muslim Community Center of Charlotte will obtain a report from a consumer reporting agency, for employment purposes. The Muslim Community Center of Charlotte may use information in the consumer report for decisions related to your employment. A copy of the report will be provided to you, free of charge, if you wish.

By your signature below, you authorize The Muslim Community Center of Charlotte to obtain this consumer report. If you wish to receive a copy of the report, please include your address below. This notice and authorization are in accordance with the Fair Credit Reporting Act.

I authorize the Muslim Community Center of Charlotte to obtain a consumer report for employment purposes.

Signature: \_\_\_\_\_

Name (print): \_\_\_\_\_

Date: \_\_\_\_\_

I wish to receive a copy of my consumer report. My address is:

Print name			
Street address	City	State	ZIP code

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The following is intended to inform and otherwise notify the credit reporting agency:

This notice is intended to certify compliance, to the best of our ability, with the requirements as outlined in the Fair Credit Reporting Act (FCRA). The applicant's or employee's signature demonstrates their express authorization and understanding of this background check and the information it will yield.

I, the employer, certify the following:

- The applicant, or employee, has been notified, and their permission was granted to get a consumer report;
- I have complied with all the FCRA requirements; and
- There will be no discrimination against the applicant or other misuse of the information, as provided by any applicable federal or state equal opportunity laws or regulations.

Signature: \_\_\_\_\_

Name (print): \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_