

EOR Name: _____



EMPLOYMENT PROFILE

Authorization Form to be Fully Completed & Signed

Human Resource ProFile, Inc.
8506 Beechmont Ave.
Cincinnati, OH 45255-4708
800-969-4300 / 513-388-4300
Fax 513-388-4320

**** Please Print Clearly ****

APPLICANT INFORMATION

Name _____, _____, _____
Last First Middle

Date of Birth ____/____/____ *Age is not a criterion in any decision, but is used for identification purposes ONLY.* Social Security # _____
Month Day Year

Please list all residences for the past seven (7) years (use an additional sheet of paper, if needed), starting with current address:

Street Address _____

City _____ County _____ State _____ Zip _____

Dates at this address: ____/____ to (CURRENT) ____/____ Last Name(s) used if different than current name: _____
MM YY

City _____ County _____ State _____ Zip _____

Dates at this address: ____/____ to ____/____ Last Name(s) used if different than current name: _____
MM YY MM YY

City _____ County _____ State _____ Zip _____

Dates at this address: ____/____ to ____/____ Last Name(s) used if different than current name: _____
MM YY MM YY

City _____ County _____ State _____ Zip _____

Dates at this address: ____/____ to ____/____ Last Name(s) used if different than current name: _____
MM YY MM YY

City _____ County _____ State _____ Zip _____

Dates at this address: ____/____ to ____/____ Last Name(s) used if different than current name: _____
MM YY MM YY

City _____ County _____ State _____ Zip _____

Dates at this address: ____/____ to ____/____ Last Name(s) used if different than current name: _____
MM YY MM YY

City _____ County _____ State _____ Zip _____

Dates at this address: ____/____ to ____/____ Last Name(s) used if different than current name: _____
MM YY MM YY

City _____ County _____ State _____ Zip _____

Dates at this address: ____/____ to ____/____ Last Name(s) used if different than current name: _____
MM YY MM YY

I have been informed in writing that a consumer report or investigative consumer report may be obtained on me for employment purposes. I hereby authorize the procurement of the report and authorize and direct the release to Human Resource ProFile, Inc., an independent contract agency, information held by any parties regarding my previous employment, my criminal history record and/or record of convictions in federal, state and local files for violations of any federal, state, local statutes or ordinances, my credit history, workers' compensation history, driving record, government agency lists, and scholastic records and hereby release said persons, schools, companies, courts, agencies, and law enforcement authorities from any liability for any damage whatsoever for issuing this information. I further understand this information may be reviewed periodically by Human Resource ProFile, Inc. and reported to my prospective/current employer. I hereby acknowledge that Human Resource ProFile, Inc. cannot vouch for or guarantee the accuracy of information provided by third parties. Accordingly, I release Human Resource ProFile, Inc., its agents and/or my prospective/current employer from any and all liabilities arising out of any errors or omissions regarding my background information and authorize Human Resource ProFile, Inc. to release any and all information to my prospective/current employer.

Applicant Signature _____ Date _____

TO BE COMPLETED BY EMPLOYER

From : _____ Employer Name: _____ Client Initials: _____

Date Sent _____ Time Sent _____ Acct # ADFIN-NC

All-County Criminal History National Criminal Database National VSOS

Special Request

When requesting a report for employment purposes from HRP, you must also certify to HRP that you have provided the applicant/employee with the disclosure form and obtained the applicant/employee's consent to procure the report. HRP's two page Profile Form complies with these requirements.



IMPORTANT DISCLOSURE

FCRA Required
Clear and Conspicuous Notice

Please read before completing and signing the Employment ProFile Form.

I HAVE BEEN INFORMED IN WRITING AND ACKNOWLEDGE THAT A "CONSUMER REPORT" AND/OR AN "INVESTIGATIVE CONSUMER REPORT" MAY BE OBTAINED ON ME FOR EMPLOYMENT PURPOSES. I UNDERSTAND THAT SUCH REPORTS MAY INCLUDE INFORMATION REGARDING MY CREDIT HISTORY, CRIMINAL RECORD, EDUCATION HISTORY, WORK HISTORY, AS WELL AS MY CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, OR MODE OF LIVING. AN "INVESTIGATIVE CONSUMER REPORT" INVOLVES PERSONAL INTERVIEWS OF SOURCES SUCH AS YOUR NEIGHBORS, FRIENDS, OR ASSOCIATES TO OBTAIN INFORMATION AS TO YOUR CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, AND MODE OF LIVING.

I FURTHER UNDERSTAND THAT THIS "CONSUMER REPORT" AND/OR "INVESTIGATIVE CONSUMER REPORT" WILL BE COMPLETED BY HUMAN RESOURCE PROFILE AND PROVIDED TO MY PROSPECTIVE/CURRENT EMPLOYER FOR EMPLOYMENT PURPOSES. I ALSO UNDERSTAND THAT I HAVE CERTAIN RIGHTS THAT ALLOW ME TO DISPUTE ANY ERRONEOUS INFORMATION CONTAINED IN MY REPORT.

I FURTHER UNDERSTAND THAT WITH RESPECT TO ANY "INVESTIGATIVE CONSUMER REPORT" THAT MAY BE REQUESTED BY MY PROSPECTIVE/CURRENT EMPLOYER, I HAVE THE RIGHT TO REQUEST FROM MY PROSPECTIVE/CURRENT EMPLOYER DISCLOSURE OF THE NATURE AND SCOPE OF THE "INVESTIGATIVE CONSUMER REPORT" AS WELL AS A WRITTEN SUMMARY OF THE RIGHTS OF CONSUMERS TO OBTAIN AND DISPUTE INFORMATION IN CONSUMER REPORTS.

I ALSO ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THIS STATEMENT.

Signature _____ **Date** _____

Human Resource ProFile, Inc.

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STATE LAW NOTICES AND DISCLOSURES – BACKGROUND INVESTIGATION

Pursuant to state law, the following disclosures are provided to state residents.

CALIFORNIA applicants or employees only: By signing below, you acknowledge receipt of this NOTICE – BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check the box if you would like to receive a copy of the investigative consumer report, free of charge, if one is obtained by my prospective employer or its subsidiaries.

YES, I am a California Applicant and I request to receive a free copy of any investigative consumer report ordered on me by checking this box.

YES, I am a California Applicant and I hereby waive my right to obtain a copy of the consumer report by checking this box.

NEW YORK applicants or employees only: You have the right to inspect and receive a copy of any investigative consumer report requested by my prospective employer or its subsidiaries by contacting Human Resource ProFile, Inc., 8506 Beechmont Avenue, Cincinnati, OH 45255, Phone: 800-969-4300.

NEW YORK applicants or employees only: By signing below, you acknowledge receipt of a copy of [Article 23-A](#) of the New York Correction Law.

WASHINGTON applicants or employees only: You have the right to request from Human Resource ProFile, Inc. a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

MAINE, MASSACHUSETTS, MINNESOTA, NEW JERSEY, and OKLAHOMA applicants or employees only: Please check the box if you would like to receive a copy of your consumer report, free of charge, if one is obtained by my prospective employer or its subsidiaries.

Check box to receive report:

VERMONT applicants or employees only:

Pursuant to 9 V.S.A. §§ 2480e and 2480g, no person may request a credit report on you unless it is obtained pursuant to the order of a Court having jurisdiction or it has secured your written consent to do so and is used for the purpose for which you consented. Credit reporting agencies must adopt reasonable procedures to assure maximum compliance with such requirements. The foregoing shall not affect (1) the ability of a person, who has secured such consent, to include in the same request permission to also obtain credit reports, in connection with the same transaction or credit extension, for the purpose of reviewing, increasing the credit line on, taking collection on, or for other legitimate purpose regarding, your account; or (2) the use of credit information for the purpose of prescreening as defined and permitted by the Federal Trade Commission.

Signature: _____

Date: _____

Print Name: _____