OHIO AAA7 VETERAN-DIRECTED SERVICES
Employee Background Check Clearance Form

Date: _____

This notice is to inform you that AAA7 has reviewed the results of the background check(s) for the employee listed below.

Veteran Name: _____

Employee Name: _____

Background Check Type: _____
Background Check Run Date: _____
Background Check Results: ☐ Cleared for Hired ☐ Not Approved for Hire

Background Check Type: _____
Background Check Run Date: _____
Background Check Results: ☐ Cleared for Hired ☐ Not Approved for Hire

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I, _____, the care manager for the above veteran have read and reviewed the provided background check results and have made the below decision regarding this employee's employment.

☐ Yes, I wish to approve this employee for hire within the Ohio Veteran-Directed Services Program.

- By marking "Yes" and signing, you are stating that you have read the enclosed criminal background check report and are deciding to hire the employee anyway.
- The employee's **Start date** will be _____.

☐ No, I do not approve this employee for hire within the Ohio Veteran-Directed Services Program.

_____ _____

Care Manager's Signature Date