

DEKALB COUNTY HOPE, INC
NOTICE TO VOLUNTEERS REGARDING BACKGROUND INVESTIGATION

I understand that a consumer report (background screening report) and/or an investigative consumer report (reference checks and/or interviews) that may include information from public or private sources regarding my character, driving records, criminal history, court records (both civil and criminal), qualifications and experience, work habits, and/or other information relevant to my volunteer service may be obtained in connection with my application as a volunteer with **DeKalb County HOPE, INC**.

I understand that, if I am approved for volunteer service by DeKalb County HOPE, INC, this background check authorization will be kept on file and may be used at any time during my service to procure further information when, in the judgment of **DeKalb County HOPE, INC**, such may be necessary.

I hereby release and discharge to the extent permitted by law, **DeKalb County HOPE, INC**, its employees, any individual or agency obtaining information for **DeKalb County HOPE, INC**, and any personal or professional reference, from any and all claims, damages, losses, liabilities, costs, or other expenses arising from the retrieving, reporting and/or disclosure of information in connection with this background investigation.

I understand that I am volunteering my services and declare in no way shall I be considered an employee or subcontractor or independent contractor of **DeKalb County HOPE, INC**.

By signing below, I, _____, have read, understand and consent to the above. I further authorize that a photographic copy or a telephonic facsimile of this document shall be valid for purposes present and future. My signature below certifies that all information I have provided in connection with this background check is true, accurate and complete to the best of my knowledge.

I understand that I have specific prescribed rights as a consumer under the Fair Credit Reporting Act and may have additional rights under relevant state laws. I hereby certify that I have read the Summary of Rights under the Fair Credit Reporting Act located at <http://www.safehiringsolutions.com/pdfs/FCRASummary.pdf>

AUTHORIZATION

Print Name (last, first, middle) _____
Social Security Number

Date of Birth (MM/DD/YYYY) _____
Drivers License Number _____
Drivers License State
(For ID Purposes Only)

Any other names I have been known by: _____

Current Address: _____

Previous Addresses (Last 10 Years) _____

Signature _____
Date