

CITY OF BLACK HAWK
BACKGROUND INQUIRY AND CONSUMER CREDIT HISTORY RELEASE

Applicant:

In connection with my application for employment with the City of Black Hawk, I understand that investigative inquiries on my background in accordance with all state and federal laws are to be made on me. These inquiries may include information as to my personal character, abilities, work habits, residency, immigration status, performance, experience, worker's compensation history, medical background relevant to the job I am applying for, and other qualities pertinent to my qualifications for employment, including reasons for termination of past employment such as contained in disciplinary actions or internal affairs investigations files. I understand that this employer and/or its agents may make inquiries, including but not limited to my criminal history, driving history, medical background, Social Security number verification, consumer credit history, education, professional licensing, and worker's compensation history. Furthermore, I understand that this employer and/or its agents may request information from various federal, state and other agencies that maintain records concerning my past driving history, credit history, criminal history, military history, worker's compensation history, medical background, civil and other experiences. I understand that according to the Equal Employment Opportunity Commission Regulations, I am entitled to know if employment is denied solely based on my worker's compensation history or any disability discovered in my medical background check. Upon written request, I will be given a copy of the information received regarding the worker's compensation history, or medical background check accompanied with an explanation of how either: (1) the potential hire posed a significant risk of substantial harm to the health or safety of the individual or others that could not be eliminated or reduced by reasonable accommodation and/or (2) the reason for rejection was job related and consistent with business necessity.

Consumer Credit History

In connection with my application for employment, I understand that investigative inquiries regarding my consumer credit history, in accordance with the Fair Credit Reporting Act and the Colorado Employment Opportunity Act, may be made by this employer and/or its agents for the purposes of obtaining information about my credit history relevant to the job I am applying for. This employer and/or its agents may request information from various Consumer Reporting Agencies that maintain records concerning my past credit history. Upon my written request, I will be informed whether a consumer credit report was requested and will be given full information as to the nature and scope of the investigation, as well as the name of the Credit Reporting Agency providing the information. If the report contains information about my credit score, credit account balances, payment history, savings or checking account balances, or savings or checking account numbers, I will be provided a copy of the information. I understand that in the event this employer receives disqualifying information from a consumer credit report pertinent to my qualifications for employment, I will be given notice of the disqualifying information and provided a reasonable time to correct discrepancies. I understand that according to the Fair Credit Reporting Act, I am entitled to know if employment is denied or if adverse employment action is taken against me solely or in part because of information obtained from a Consumer Reporting Agency. I authorize without reservation, any party (including, but not limited to, employers, law enforcement agencies, state agencies, institutions and private information bureaus or repositories) contacted by this employer and/or its agents to furnish any or all of the above-mentioned information. In addition, I hereby release and the City of Black Hawk from any and all liability for damages arising from the investigation and disclosure of the requested information, excluding any damages that may be allowed pursuant to C.R.S. Section 8-2-126. I further release and discharge all liability from all companies, agencies, officials, officers, employees and other persons, who, in good faith, provide to this employer and/or its agents the above-mentioned information as requested, in order to successfully complete a background and consumer credit history investigation for my application of employment. I will allow a photocopy of this authorization to be as valid as the original. For more information, including information about additional rights, I understand that I may go to www.consumerfinance.gov/learnmore or write to: Bureau of Consumer Financial Protection, 1700 G Street N.W., Washington, DC 20552.

PRINT FULL NAME: _____ SOCIAL SECURITY #: _____

DATE OF BIRTH*: _____

DRIVER'S LICENSE: STATE: _____ NUMBER: _____

CURRENT ADDRESS: _____

CITY/STATE/ZIP: _____

APPLICANT SIGNATURE: _____ DATE: _____

*DATE OF BIRTH is being requested for the purpose of identification in obtaining accurate retrieval of records and will not be used for discriminatory purposes.