

Cuyahoga Community College

DISCLOSURE AND CONSENT REGARDING CONSUMER REPORTS

Please be advised that one or more consumer reports may be obtained by Cuyahoga Community College and/or its parent, affiliate, or subsidiary companies (collectively, Cuyahoga Community College) for evaluation of clinical placement eligibility. These consumer reports may contain information concerning your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living.

These consumer reports may also include investigative consumer reports obtained from Corporate Screening Services, Inc., 16530 Commerce Court, Cleveland, Ohio 44130-6305 Phone Number 800 229-8606. These investigative reports may include information concerning your character, general reputation, personal characteristics, and mode of living and may include information obtained through interviews. You may request, in writing, a written summary of your rights under the Fair Credit Reporting Act.

Please sign below to indicate your consent:

1) I hereby authorize Cuyahoga Community College sign to obtain consumer reports, including investigative consumer reports, concerning me for clinical placement purposes. If I am placed for clinical rotation, this authorization shall remain on file and shall serve as ongoing authorization for Cuyahoga Community College to procure consumer reports, including investigative consumer reports, for lawful purposes at any time during my clinical placement period.

2) I hereby authorize any present or former employers, consumer reporting agencies, educational institutions, criminal justice agencies, departments of motor vehicles, public agency, financial institutions, or any other person or agency having knowledge of me to relate information or opinions about myself, including data received from other sources, in order that I may be evaluated for clinical placement purposes. I hereby release these persons and/or organizations from any and all liability for damages of whatever kind or nature, whether known or unknown, which may at any time accrue to me on account of information obtained pursuant to this authorization.

Print Name

Signature

Other Name(s)

Date

Date of Birth

Social Security Number

Street Address

City

State

ZIP

New York residents only: You have the right to inspect and receive a copy of any investigative consumer report requested by Employer by contacting the consumer reporting agency identified above directly.

Minnesota and Oklahoma residents only: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

California residents only: By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report if one is obtained by the Company at no charge whenever you have a right to receive such a copy under California law.