City of Lincoln/Lancaster County Criminal History Check

I understand that criminal history checks will be conducted on selected applicants as a condition of employment. By signing and submitting this form you acknowledge that the information is true and complete to the best of your knowledge and that any false or incomplete information may be grounds for you not being employed by the City/County, or for your dismissal after beginning work.

| | <u>Legal</u> First Name | e | Middle N | ame | | | |
|--|--|--|-------------------------------|-----------|------------|--------|---------------|
| | | | | | Male | | Female |
| Any other <u>legal</u> name(s) by which you have be | en known (i.e. maiden name.) | Date of Birth (For Verification pur | poses only) | | | | |
| I understand that completion of the is an official City/County record n personal information at the time of employment. | naintained by the City of | f Lincoln/Lancaster County | Human Re | source | es Departi | ment. | Falsifying |
| As part of this background check, | you may be asked to pro | ovide certain information, e | ither electro | onicall | y or in pa | per fo | rmat: |
| All previous addresses The names of all previous names or | ious employers which yo | ou listed on your applicatio ave been known. | n to verify e | emplo | yment (if | applic | able) |
| Failure to provide information in a application or in the course of the termination from employment. | | | | | | | |
| Your electronic signature and subrobtaining of reports by the City of | | | | | | cy and | authorizes th |
| Signature (Electronic) | | | Date | | | | |
| To be completed by Departm | ant | | | | | | |
| 1. Please indicate which bac | kground check(s) yo | u would like completed | • | | | | |
| ☐ Standard Check | □ APS/CPS | | Additional | Chec | ek: | | |
| | | | Additional | Chec | ek: | | |
| 2. Please indicate the type of Check one: □New Submission | f submission and em □Resubmission | | | | | r | |
| 2. Please indicate the type of Check one: □New Submission Check one: □Job Applicant | f submission and em □Resubmission | ployee/worker. □Volunteer □Indepen | | actor | □Othei | r | |
| 2. Please indicate the type of Check one: □New Submission Check one: □Job Applicant Class Title or volunteer title | f submission and em □Resubmission | ployee/worker. □Volunteer □Indepen | dent Contr | actor | □Other | r | |
| 2. Please indicate the type of Check one: □New Submission Check one: □Job Applicant Class Title or volunteer title Department Name | f submission and em □Resubmission □Unclassified Worker | ployee/worker. □Volunteer □Indepen | dent Conti | actor | □Other | r | |
| 2. Please indicate the type of Check one: □New Submission | f submission and em ☐ Resubmission ☐ Unclassified Worker ☐ Division | ployee/worker. □Volunteer □Indepen Requ Phone# | dent Contri isition Number | actor | □Other | r | |
| 2. Please indicate the type of Check one: □New Submission Check one: □Job Applicant Class Title or volunteer title Department Name | f submission and em Resubmission Unclassified Worker Division *Highlighted sec | ployee/worker. Volunteer Independent Requirement Phone# | dent Contri isition Number | actor | □Other | r | |
| 2. Please indicate the type of Check one: □New Submission □Check one: □Job Applicant □Class Title or volunteer title Department Name E-mail | Tesubmission and em Resubmission Unclassified Worker Division *Highlighted sec Resources Only crified: (Ini red): (Ini (Ini | ployee/worker. Volunteer Independent Phone# Interviewing Official: Signature etions are required to be fulfilled to be fulfilled by tials) Date tials) Date tials) Date tials) Date to be fulfilled by the property of t | dent Contri isition Number | (if appli | □Other | r | |
| 2. Please indicate the type of Check one: New Submission Check one: Job Applicant Class Title or volunteer title Department Name E-mail To be completed by Human FoneSource Background Check Vercified (if requidition) Check Vercif | Tesubmission and em Resubmission Unclassified Worker Division *Highlighted sec Resources Only crified: (Ini red): (Ini (Ini (Ini (Ini | ployee/worker. Volunteer Independent Phone# Interviewing Official: Signate etions are required to be functional to be functional to the plant of t | dent Conti | fay | cable) | r | |



APPLICANT DISCLOSURE AND AUTHORIZATION FORM

[IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION]

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

[Employer] ("The Company") may obtain information about you from a consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records ("driving records"), verification of your education or employment history including current position, worker's compensation injuries, or other background checks. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report conducted by [One Source The Background Check Company, PO Box 24148, Omaha, NE 68124, 1.800.608.3645, www.onesourcebackground.com]. The scope of this notice and authorization is allowing the Company to obtain from any outside organization all manners of consumer reports and investigative consumer reports now and throughout the course of your employment to the extent permitted by law.

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by the Company at any time after receipt of this authorization and throughout my employment, if applicable. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

PLEASE PRINT LEGIBLY

This information will be used for background screening purposes only and will not be used for any other purpose

| Last Name: | First Name: | | Middle: | |
|------------------|------------------------|-------|---------|--------------|
| | | | | |
| | Date of Birth (MM/DD | | | |
| | State of Driver's Lice | | | |
| Present Address: | Phone: | | | |
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| | | | | |
| | | | | |
| Signature: | | Date: | | |



Para información en español, visite <u>www.consumerfinance.gov/learnmore</u> o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

- You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment or to take another adverse action against you must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - o you are the victim of identity theft and place a fraud alert in your file;
 - o your file contains inaccurate information as a result of fraud;
 - o you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- You have the right to ask for a credit score. Credit scores are numerical summaries of your credit-worthiness based
 on information from credit bureaus. You may request a credit score from consumer reporting agencies that create
 scores or distribute scores used in residential real property loans, but you will have to pay for it. In some
 mortgage transactions, you will receive credit score information for free from the mortgage lender.
- You have the right to dispute incomplete or inaccurate information. If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- Access to your file is limited. A consumer reporting agency may provide information about you only to people with a valid need usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- You must give your consent for reports to be provided to employers. A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to_www.consumerfinance.gov/learnmore.



- You may limit "prescreened" offers of credit and insurance you get based on information in your credit report. Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a "security freeze" on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent.

However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- Identity theft victims and active duty military personnel have additional rights. For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:



| TYPE OF BUSINESS: | CONTACT: |
|---|---|
| 1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliatesb. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB: | a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552 b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357 |
| 2. To the extent not included in item 1 above: a.National banks, federal savings associations, and federal branches and federal agencies of foreign banks b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act. c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations d. Federal Credit Unions | a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050 b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480 c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106 d. National Credit Union Administration Office of Consumer Financial Protection (OCFP) Division of Consumer Compliance Policy and Outreach 1775 Duke Street Alexandria, VA 22314 |
| 3. Air carriers | Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590 |
| 4. Creditors Subject to the Surface Transportation Board | Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423 |
| Creditors Subject to the Packers and Stockyards Act, 1921 Small Business Investment Companies | Nearest Packers and Stockyards Administration area supervisor Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200 Washington, DC 20416 |
| 7. Brokers and Dealers | Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549 |
| 8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations | Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090 |
| Retailers, Finance Companies, and All Other Creditors Not Listed Above | Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357 |



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 also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check the box if you would like to receive a copy of the investigative consumer report or consumer credit report at no charge if one is obtained by the Company. Check box to receive report. |
|--|
| NEW YORK applicants or employees only: You have the right to inspect and receive a copy of any investigative consumer report requested by the Company by contacting One Source The Background Check Company, PO Box 24148, Omaha, NE 68124, 1.800.608.3645, www.onesourcebackground.com. |
| NEW YORK applicants or employees only: By signing below, you also 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 One Source The Background Check Company, PO Box 24148, Omaha, NE 68124, 1.800.608.3645, www.onesourcebackground.com a written summary of your rights and remedies under the Washington Fair Credit Reporting Act. |
| MASSACHUSETTS, MINNESOTA 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 the Company. Check box to receive report. |
| |
| Signature: |
| Print Name: |
| Date: |