



## DISCLOSURE AND AUTHORIZATION FOR RELEASE OF INFORMATION FOR CONSUMER REPORTS

### Background Screening Disclosure

I hereby authorize Habitat for Humanity Portland Region, through Coeus Global and its designated agents and representatives to conduct a comprehensive review of my background through a consumer report and/or an investigative consumer report to be generated for volunteering, homeownership, employment, promotion, reassignment and retention as an employee or volunteer. I understand that the scope of the consumer report/investigative consumer report may include, but is not limited to, the following areas: names and dates of previous/current employment, work experience, worker's compensation claims, criminal history records (from local, state, federal, international and other law enforcement agencies' records), sexual offender's lists, wants and warrants records, motor vehicle records, military records, educational verification, license verification, credit history, civil cases, OIG/GSA, OFAC/patriot act, any sanction lists, and drug testing.

Upon request, Habitat for Humanity Portland Region, or Coeus Global, located at PO Box 885, Cottonwood, CA 96022 will supply a copy of the completed consumer report or investigative consumer report along with a copy of an individual's rights under the Fair Credit Reporting Act.

### Authorization and Release

I, \_\_\_\_\_, authorize the complete release of these records or data pertaining to me which an individual, company, firm, corporation, nonprofit, or public agency may have. I authorize the full release of the information described above, without any reservation, throughout any duration of my employment or volunteer placement, or as a condition of my home ownership application at Habitat for Humanity Portland Region.

I certify that all information provided below and on my application is correct to the best of my knowledge. Any false statements provided in this form and my application will be considered just cause for termination as an employee, volunteer or homeowner applicant at any time. This authorization and consent shall be valid in original, fax, or copy form.

The following information is required by criminal courts, law enforcement agencies and other entities for identification purposes when checking records. It is confidential and will not be used for any other purpose.

All information provided by Coeus Global shall be in compliance with the Fair Credit Reporting Act (FCRA) and all applicable Federal, State and local regulations.

\_\_\_\_\_  
Full Name

\_\_\_\_\_  
Maiden/AKA/Previous Name(s)

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Date of Birth (mm/dd/yyyy)

(DOB will not affect  
homeownership candidate  
decision)

\_\_\_\_\_  
Driver's License Number

\_\_\_\_\_  
State License Issued

\_\_\_\_\_  
Current Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
ZIP Code

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Guardian Signature (if applicable)

\_\_\_\_\_  
Date