VOLUNTEER FCRA DISCLOSURE & AUTHORIZATION

DISCLOSURE

As a volunteer of Biblica you are a consumer with rights under the FCRA. **Biblica** may choose to obtain and use information contained in either a consumer report or an investigative consumer report from a consumer reporting agency about you when considering your application for volunteering.

Our *consumer reporting agency* is Employers Council, Inc. at PO Box 539, Denver, CO 80201, toll free 800.884.1328, which, for monetary fees, dues, or on a cooperative nonprofit basis, regularly assembles or evaluates consumer or other information on consumers for the purpose of furnishing consumer reports to others, such as **Biblica.**

A *consumer report* means any written, oral or other communication of any information by a consumer reporting agency bearing on your character, general reputation, personal characteristics, or mode of living which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in establishing your eligibility for volunteer purposes.

An *investigative consumer report* means a consumer report or portion thereof in which information on your character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with your neighbors, friends, or associates reported on or with others with whom you are acquainted or who may have knowledge concerning any such items of information.

In the event an investigative consumer report is prepared, you may request additional disclosures regarding the nature and scope of the investigation requested as well as a written summary of your rights under the FCRA.

AUTHORIZATION

By signing below, I hereby voluntarily authorize Biblica, to obtain either a consumer report or an investigative consumer report about me from a consumer reporting agency and to consider this information when making decisions regarding my volunteering at Biblica. I understand that I have rights under the FCRA, including the rights discussed above.

I voluntarily authorize all persons, including law enforcement agencies, motor vehicle departments, and municipal, state, and federal courts to release information they may have about me to Biblica. I understand that if I am a volunteer for Biblica, this authorization shall remain in effect throughout my volunteering. This report may be delivered in either written or electronic form.

_____ _____

Signature **Date**

_____

Printed Name

_____ _____

Signature of Parent or Guardian if Volunteer is a Minor **Date**

_____ _____

Social Security Number **Date of Birth**

Please list addresses for the last seven years. Use additional paper if necessary:

_____

Current Address Since: Mo/Yr Street City State/Zip

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Previous Address Since: Mo/Yr Street City State/Zip

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Previous Address Since: Mo/Yr Street City State/Zip