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### **Disclosure Regarding Consumer and/or Investigative Report**

The employer/company \_\_\_\_\_ (henceforth known as "employer") may obtain information about you for employment purposes from a third party consumer reporting agency. Thus, you may be the subject of a "consumer report and/or investigative report". Such consumer report may include information bearing on your character, general reputation, personal characteristics, mode of living and credit standing. The scope of the consumer/investigative report may include but is not limited to, the following areas: criminal history records, sex offender's list, abuse registry, wants and warrants records, motor vehicle records, educational/employment verification, license verification, credit history, social security verification, civil cases, worker's compensation claims, OIG/GSA, OFAC/Patriots act, any sanction list, FBI fingerprinting and drug testing. The employer may obtain consumer reports and investigative reports now and throughout the course of your employment. You have the right upon written request to receive a copy of your consumer report. If an "investigative report" has been obtained, you also have the right to a description of the nature and scope of the investigation

### **Acknowledgment and Authorization for Background Check**

By signing below, I acknowledge receipt of the "Disclosure Regarding Consumer an/or Investigative Report". I also certify that I have received a copy of "A Summary of Your Rights under the Fair Credit Reporting Act."

I understand by signing below, that I am Authorizing DataLink Investigative Services, P.O. Box 755, White Pine, TN 37890, and/or its Agents to obtain any and all consumer reports as listed in the above "Disclosure". Said consumer reports shall be made for the purpose of employment, promotion, reassignment or retention as an employee. I authorize any law enforcement agency, administrator, local, state or federal agency, institution, school or university, information service bureau or employer to furnish any and all background information requested by DataLink Investigative Services. I hereby agree that a telephonic facsimile (fax) or photographic copy of this document shall be valid as an original.

*Please Print Legibly*

Print Name: \_\_\_\_\_

Date of Birth; \_\_\_\_\_

Date Signed: \_\_\_\_\_

Signature: \_\_\_\_\_

*This form is not meant to provide legal advice of any kind. Legal advice should be sought from your legal counsel. DataLink Investigative Services does not guarantee the legal appropriateness of this document.*