



## CRIMINAL BACKGROUND CHECK CONSENT AND AUTHORIZATION TO OBTAIN CONSUMER REPORT

### *FAIR CREDIT REPORTING ACT CONSUMER DISCLOSURE AND GENERAL AUTHORIZATION*

I understand that National Audubon Society, Inc. ("Audubon") may utilize the services of a third party consumer reporting agency as part of the procedure for processing my application for volunteering. I also understand if my application for volunteering is granted, Audubon may obtain further information through subsequent investigations by a consumer reporting agency so as to update, renew or extend my volunteer status.

I understand a consumer reporting agency's investigation may include obtaining information regarding my criminal conviction background consistent with federal and state law. I understand a criminal background check may be conducted by direct or indirect contact with public agencies or other persons who may have such knowledge.

I also understand that before I am denied the ability to volunteer based, in whole or part, on information obtained in the report, I will be provided a copy of the report and a description in writing of my rights under the federal Fair Credit Reporting Act.

I understand if I disagree with the accuracy of any information in the report, I must notify Audubon within five days of my receipt of the report. If I notify Audubon within five days of the receipt of the report that I am challenging information in the report, Audubon will not make a final decision on my volunteer status until after I have had a reasonable opportunity to address the information contained in the report.

I hereby consent to this investigation and authorize Audubon to procure a report on my background as stated above. The report is to be completed by Orange Tree Employment Screening, 7275 Ohms Lane, Minneapolis, MN 55439, 800-886-4777, [www.orangetreescreening.com](http://www.orangetreescreening.com).

Audubon may not obtain any consumer report on you for volunteer purposes/medical staff privileges without your written consent. Also, Audubon may not obtain medical information about you without your express consent to the release of medical information. Consent to the release of medical information, is *not* covered by the authorization contained in this document.

#### **State-specific information:**

- **New York residents only:** By signing below, you also acknowledge receipt of Article 23-A of the New York Corrections Law. You have the right to inspect and receive a copy of any investigative consumer report requested by Audubon 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 Audubon.
- **California residents only:** If you are a California resident or applying to volunteer at an Audubon location in the State of California, in addition to this disclosure/authorization, please review and complete the "**Disclosure and Acknowledgement Concerning Consumer Credit Report Obtained for Volunteer Purposes Pursuant to California Law**" document on the following page.



**\*\*CALIFORNIA APPLICANTS OR RESIDENTS ONLY\*\***

**DISCLOSURE AND ACKNOWLEDGEMENT CONCERNING CONSUMER CREDIT REPORT OR  
INVESTIGATIVE CONSUMER REPORT OBTAINED FOR VOLUNTEER PURPOSES  
PURSUANT TO CALIFORNIA LAW**

In connection with your application for volunteering with The National Audubon Society ("Audubon"), a third party agency will obtain a consumer report or an investigative consumer report on you, as defined in the California Consumer Credit Reporting Agencies Act, Cal. Civ. Code §1785.1 et seq., and the California Investigative Consumer Reporting Agencies Act, Cal. Civ. Code §1786 et seq. An "investigative consumer report" includes information as to your character, general reputation, personal characteristics, and mode of living.

The requested investigation on you may include one or more of the following searches; government databases; criminal history record; motor vehicle driver record; civil courts; identity; credit report, education credentials; professional credentials and employment history.

California law requires that you check the following box to indicate your desire to receive a copy of the report.

Please forward a copy of the report to my attention at the following address.

Street:

Apt/Unit #:

City:

State:

ZIP Code:

**Information You May Request If An Investigative Consumer Report Is Obtained**

(Summary of Cal. Civ. Code § 1786.22)

If Audubon obtains an investigative consumer report on you, you may inspect or obtain a copy of your file and certain other information that is maintained by Audubon's third party agency. In addition to making your file available for your inspection, Audubon's third party agency will identify the recipients of any investigative consumer report on you that they have furnished for employment, insurance, or any other purpose within the three-year period preceding your request, and the dates, original payees, and amounts of any checks or charges upon which any adverse characterization of you that may be included in your file is based.

During normal business hours and on reasonable notice, Audubon's third party agency will make your file and other information available to you: 1) In person, if you appear in person and furnish proper identification. A copy of your file will also be available to you for a fee not to exceed the costs of duplication; and/or 2) by certified mail, if you make a written request, with proper identification, for copies to be sent to a specified addressee but, in complying with such a request, Audubon's third party agency will not be liable for disclosures to additional parties that may be caused by mishandling of mail after such mailings are sent.

Audubon's third party agency will provide a summary of all information contained in your file which is required to be provided to you, by telephone, if, with proper identification, you have made a written request for telephone disclosure, and you have prepaid, or had charged directly to you, any toll charge for the telephone call. "Proper identification" as used means that information generally deemed sufficient to identify a person, including documents such as a valid driver's license, social security account number, military identification card, and credit cards. You may be accompanied by one other person of your choosing who shall furnish reasonable identification. Audubon's third party agency may require you to furnish a written statement granting them permission to discuss your file in such person's presence.



Audubon's third party agency will provide trained personnel to explain to you any information provided to you, and will provide a written explanation of any coded information contained in your files.

By signing the Fair Credit Reporting Act Consumer Disclosure and General Authorization of Report for Volunteer Purposes, I have authorized Audubon to obtain a consumer report, or an investigative consumer report, on me.

**This is to confirm that I have read, and hereby acknowledge receipt of, the information set forth above concerning my rights under the laws of California.**

**California Applicant's Signature:** \_\_\_\_\_

**APPLICANT AUTHORIZATION:**

This information provided on this form will be used for purposes of identification only. Audubon does not discriminate on the basis of age or any other category prohibited by law.

**I certify that the information I provide on this form is true and complete.**

**Applicant's Signature:** \_\_\_\_\_

**Applicant Information:**

Legal Last Name:            Legal First Name:            Legal Middle Name:

Phone:                            Email:

Social Security #:            Date of Birth:

Driver License/ID#:            State:

***\*\*This information will be used for purposes of identification only. Federal law prohibits discrimination on the basis of age, gender, race, color, creed, religion or national origin.***

**Other Names Used:**

Last Name:

First Name:

Middle Name:

From (Month/Year):

To (Month/Year):

Last Name:

First Name:

Middle Name:

From (Month/Year):

To (Month/Year):

Last Name:

First Name:

Middle Name:

From (Month/Year):

To (Month/Year):

Last Name:

First Name:

Middle Name:

From (Month/Year):

To (Month/Year):

Last Name:

First Name:

Middle Name:

From (Month/Year):

To (Month/Year):

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**Your Residencies Within the Last 7 Years:**

Current Street Address:

Apt:

City:

State:

ZIP Code:

Street Address:

Apt:

City:

State:

ZIP Code:

Street Address:

Apt:

City:

State:

ZIP Code:

Street Address:

Apt:

City:

State:

ZIP Code:

Street Address:

Apt:

City:

State:

ZIP Code: