By my signature below, I consent to the release to **South Florida Water Management District** (the “Company”) consumer reports and/or investigative consumer reports prepared by Screening One, Inc., 1860 N. Avenida Republica de Cuba, Tampa, FL 33605, (888) 327-6511, [www.screeningone.com](http://www.screeningone.com) (the “Agency”). If I am hired by the Company, or am working as an independent contractor or volunteer with the Company, I understand that the Company may rely on this Authorization to obtain additional reports on me from the Agency during the course of my work without asking for my consent again, to the extent permitted by applicable law.

I also authorize all of the following to disclose to the Agency and its agents and vendors all information about or concerning me, including but not limited to: My past or present employers; learning institutions, including colleges and universities; law enforcement and all other federal, state and local agencies; federal, state and local courts; the military; credit bureaus; drug and alcohol testing facilities; motor vehicle records agencies; all other private and public sector repositories of information; and any other person, organization, or agency with any information about or concerning me. The information that can be disclosed to the Agency and its agents includes, but is not limited to: Information concerning my employment and earnings history, education, credit history, motor vehicle history, criminal history, military service, professional credentials and licenses, and internet and social media posts (public posts/information only).

I also agree that a facsimile, electronic or photographic copy of this Authorization shall be as valid as the original.

I also acknowledge that I have received, reviewed and understand the following documents that have provided to me separately: (1) “Disclosure Regarding Consumer Report” or “Disclosure Regarding Investigative Consumer Report” (2) “A Summary of Your Rights under the Fair Credit Reporting Act”; and (3) the following notices, if applicable: “CALIFORNIA - NOTICE REGARDING BACKGROUND CHECKS AND CREDIT CHECKS” (if you reside in or you are applying for a position in California), “INFORMATION CONCERNING THE PROCESS IN CORRECTING A CRIMINAL RECORD” (if you reside in or you are applying for a position in Massachusetts), “A SUMMARY OF YOUR RIGHTS UNDER THE NEW JERSEY FAIR CREDIT REPORTING ACT” (if you reside in or you are applying for a position in New Jersey), “NEW YORK STATE CORRECTION LAW, ARTICLE 23-A” (if you reside in or you are applying for a position in New York state), “San Francisco Fair Chance Ordinance” (if you reside in or you are applying for a position in San Francisco, California), “VERMONT - NOTICE REGARDING CREDIT CHECKS” (if you reside in or you are applying for a position in Vermont and if the background check includes a consumer credit report), “A SUMMARY OF YOUR RIGHTS UNDER THE WASHINGTON FAIR CREDIT REPORTING ACT” (if you reside in or you are applying for a position in Washington state).

**If you live, or are applying for a position, in California, Minnesota or Oklahoma**: If you check the box below, the consumer reporting agency will send you a free copy of the report at the same time that the report is made available to the Company.

[ ]  I request a free copy of the report.

**If you live or are applying for a position in New York:** Upon request, you will be informed whether or not a consumer report was requested by the Company, and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. You have the right to inspect and receive a copy of any investigative consumer report requested by the Company by contacting the consumer reporting agency identified above directly. By signing below, you acknowledge receipt of Article 23-A of the New York Correction Law

**If you live or are applying for a position in Washington:** You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

The information set forth on the enclosed “Background Information” is my true and complete legal name and all information is true and correct to the best of my knowledge. I understand that dishonesty will disqualify me from consideration for employment with the Company and, if I am hired and/or are currently employed by the Company, which such dishonesty could result in the termination of my employment.

Signature Date

**BACKGROUND INFORMATION**

This information will be used for background screening purposes only and will not be used as hiring criteria. When completing this form, please print legibly.

|  |
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| **Applicant Information** Please provide legal name as shown on driver’s license or other government issued identification. |
|  |  |  |  |  |  |  |
| Last Name |  | First Name |  | Middle Name |  | Suffix |
|  |  |  |  |  |  |  |
|  |
| All other names used, including maiden name, alias(es) |
|  |
|  |  |  |  |  |
| SSN |  | DOB |  |  |
|  |  |  |  |  |

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| --- |
| **Current Address** |
|  |
| Street Address |
|  |
|  |  |  |  |  |
| Zip Code |  | City |  | State |
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| --- |
| **Motor Vehicle Records Search** |
|  |  |  |
| Driver License Number |  | Issuing State |
|  |  |  |