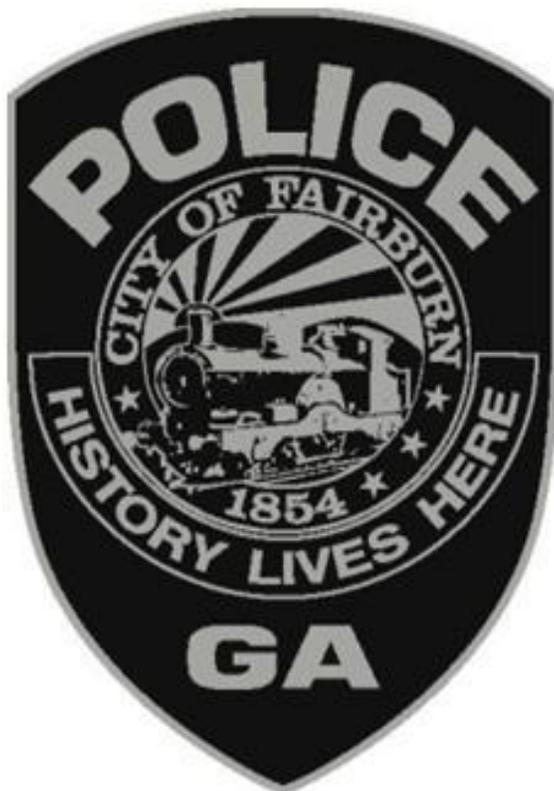


NAME: _____

DATE: _____

FAIRBURN POLICE DEPARTMENT APPLICATION



191 SW Broad Street
Fairburn, Georgia, 30213

Vernal A. Sutherland, III
Interim Chief of Police

May 5, 2016 Version



Fairburn Police Department Applicant:

Thank you for your interest in becoming a member of the Fairburn Police Department. The City offers a variety of incentives that make this agency a competitive organization as well as an enjoyable place to work. Some of the questions asked most often have been addressed below to assist you in making a decision as to whether or not you would enjoy working for this agency. If, however, you still have any questions feel free to contact our recruiter.

The City of Fairburn is a smaller city (approximately 15 square miles) located about fifteen miles south of Atlanta as traveled on I-85, and has a population of under than 15,000. People living in smaller communities such as this expect certain personalized service that larger departments either will not, or cannot, provide. This agency is called upon to perform services that vary from removing a snake from a residence to providing a funeral escort. It should be understood that our department operates under a “Proactive” philosophy with the understanding that the officer should be actively searching for violations and then taking appropriate action. Officer action could be as simple as giving a verbal warning for a minor traffic infraction, or as great as taking someone’s freedom through an arrest. Officers must be willing to take whatever action is reasonable and necessary to complete their duties. Departments engaging in proactive law enforcement generally receive more complaints than agencies that do not. Complaints are thoroughly investigated and if it is found that the officer’s actions were professional and in compliance with laws and policies, the officer will be supported fully.

Employment with a smaller agency, such as Fairburn, affords the patrol officer the opportunity of handling a greater variety of police functions. Smaller agencies can seldom rely on the benefit of specialized units; therefore, patrol officers are relied on to handle a multitude of tasks on a variety of response calls.

The Fairburn Police Department consists of three divisions: the Office of the Chief, the Uniform Patrol Division, and the Criminal Investigative Division (CID). The Office of the Chief and CID support the backbone of the agency: the Patrol Division.

The Patrol Division is broken up into four shifts. Each shift consists of a supervisor, an FTO, and zone officers. The Patrol Division is on a twelve-hour shift schedule with every other weekend (Friday, Saturday and Sunday) off.

All applicants applying for employment with the Fairburn Police Department must apply for the position of “Patrol Officer.” Any other position must be earned through the promotion process as outlined in the Department’s Standard Operating Procedures Manual.

The Fairburn Police Department starting salary is as follows:

| | |
|--------------------------|---|
| Non-certified candidates | \$12.55 per hour - \$27,414.00 per year |
| Certified Officers | \$16.03 per hour - \$35,000.00 per year |

In addition to the starting salary, the Fairburn Police Department offers the following pay incentives:

| | |
|--|-------------------|
| FTO Certification | - 1 step increase |
| Intermediate Certification | - 1 step increase |
| Advanced Certification | - 1 step increase |
| Supervisory Certification | - 1 step increase |
| Managerial Certification | - 1 step increase |
| 2-Year Associates Degree from an accredited college | - 2 step increase |
| 4-Year Bachelor's Degree from an accredited college | - 2 step increase |
| Master's Degree from an accredited college | - 2 step increase |
| Bilingual – Conversational Spanish – must speak fluently | - 2 step increase |

(1 step = 2% pay increase)

To assist officers in education the City aids officers in attaining the Peace Officer Standards and Training requirement of twenty hours of continuing education and the Fairburn Police Department gives each officer forty hours paid training time per year.

Health insurance is provided at minimal cost by the City of Fairburn for all city employees and their eligible family members. Coverage for vision, dental and other voluntary insurance is also available as an additional expense.

Consideration for suitability of employment with the Fairburn Police Department begins with the completion of the application. If after reviewing the above information you are interested in being considered, you are encouraged to complete the following application.

The Fairburn Police Department is an equal employment opportunity agency and encourages all to apply regardless of race, color, sexual orientation, religion, age, gender, national origin or other protected category.

Sincerely,

Vernal A. Sutherland, III

Vernal A. Sutherland, III
Interim Chief of Police

ITEMS WHICH MUST ACCOMPANY ALL POLICE APPLICATIONS

Copies of:

- **Valid Georgia Driver's License**
- **Social Security Card**
- **High School Diploma or GED**
- **College Diploma and Transcripts**
- **Birth Certificate**
- **Military DD-214 (Long Form) (If Applicable)**
- **Investigation Authorization/Background Check**
- **GBI Forms**
 - **Criminal History Consent**
 - **Driver History Consent**
- **Resume (Appreciated but not required)**

In order to establish eligibility for employment as a Police Officer, applicants must demonstrate that they meet all qualifications and are able to perform the essential functions of the job. Therefore, the following process is established to ensure fair hiring practices.

Step 1 SUBMISSION OF AN APPLICATION

This step includes completion of an application for employment. A preview of the application will determine if the applicant meets the minimum requirements of:

1. At least 21 years of age
2. Possesses a High School Diploma or GED
3. Possesses a valid Georgia Driver's License
4. Citizenship
5. If a veteran, possesses an honorable discharge

Step 2 WRITTEN EXAMINATION

This step includes completion of an examination to evaluate the applicant's general knowledge and ability to reason. This step also evaluates the applicant's ability to observe and to recall. Finally, this step evaluates the applicant's writing ability by having the applicant write a paragraph on two generic topics.

Step 3 ORAL REVIEW BOARD

The oral interview is conducted by a review board consisting of a lieutenant, a sergeant and a patrol officer. The purpose of the oral interview is to measure those aspects which cannot be more accurately assessed by other steps in the selection process. The board members will be asking the same questions of each candidate and will be focusing on such qualities as appearance, communication skills, general poise and bearing, and alertness.

Step 4 PSYCHOLOGICAL EXAMINATION

Police Officers are often placed under moderate to severe emotional stress. Stressors may include the handling of arrests while surrounded by hostile crowds, domestic crisis situations, constant exposure to violence, injuries and the need to make sound decisions with a minimal amount of information, all contributing to their emotional stress. The ability to deal with this emotional stress is paramount to an officer's well-being and therefore, an evaluation is performed to preclude the employment of those who may be emotionally unstable, brutal or suffering from some personality disorder.

Step 5 POLYGRAPH EXAMINATION

Throughout the application process, the agency will be conducting a thorough background investigation of all applicants. The background investigation is only as complete as the information provided throughout the process. Since this is the case, applicants will be subjected to a polygraph examination to ensure truthfulness of the information provided.

Step 6 PHYSICAL EXAMINATION AND DRUG TESTING

Physical excellence is an essential quality for individuals who are to be employed as law enforcement officers and this can only be determined with the administration of a rigid medical examination. The purpose of such an

examination is to assure the employment of persons who possess the physical ability to perform the functions of a law enforcement officer. During the physical examination, tests will be conducted to determine use or abuse of drugs. Such examination will only be administered subsequent to a conditional offer of employment.

Step 7 PHYSICAL AGILITY TEST

As the essential duties of a Police Officer include a great amount of physical stress, applicants will be required to undergo a complete physical agility test to ensure that adequate strength is available for job performance when needed.

Step 8 CREDIT CHECK

The City of Fairburn Police Department will be conducting a check of your credit report through a screening agency. This process is not to check your credit score but to ensure that all accounts held by the applicants are in good standings with each creditor. Background checks will be done in accordance with all applicable federal, state, and local laws.

CONFIDENTIALITY

The results of all tests/examinations administered in conjunction with this application will remain confidential.



CITY OF FAIRBURN
56 Malone Street
Fairburn, Georgia 30213
(770) 964-2244

APPLICATION FOR EMPLOYMENT

The City of Fairburn is an equal opportunity employer. We offer assistance to applicants who may need reasonable accommodations with the application and/or interview process. Please notify the City of Fairburn Human Resources Department if you need assistance.

INSTRUCTIONS

Pay close attention! Your application will not be considered if you fail to follow instructions.

- Do not submit an incomplete application.
- Applications must be submitted to the Human Resources Department at City Hall and NOT to the individual departments.
- You may mail the application or submit it in person to the address above.
- A faxed application will not be accepted.
- Applicants are encouraged, but not required, to attach a separate resume and/or other information to support your education or training.
- Applicants are instructed NOT to call to check on the status of an application.
- This application MUST be completed in your own handwriting.

PLEASE DO NOT TYPE OR HAVE SOMEONE ELSE COMPLETE THIS APPLICATION ON
YOUR BEHALF

FAIRBURN POLICE DEPARTMENT

APPLICANT CHECK LIST

(THIS PAGE TO BE COMPLETED BY POLICE DEPARTMENT PERSONNEL ONLY)

NAME: _____

Items supplied by applicant

- 21 Years of age
- Application
- Questioner
- Copy of valid Georgia Driver's License
- Copy of Social Security Card
- Copy of Birth Certificate
- Copy of High School Diploma / GED
- Copy of DD-214 (If Applicable)
- Copy of POST Certificate (If Applicable)
- Copies of all POST Certifications (If Applicable)

Items completed/verified at agency

- Driver History
- Criminal History
- POST Profile
- Written Entrance Exam
- Writing Assessment
- Reference Letters
- Background Check
- Credit Check
- Oral Review Board
- Range
- Conditional Offer of Employment
- Physical Agility Evaluation
- Psychological Exam
- Polygraph
- Medical Exam

FAIRBURN POLICE DEPARTMENT

Date: _____ **POSITION APPLIED FOR:** _____

Name: _____
 First **Middle** **Last** **“Nickname”**

ADDRESS: _____ **Apt No:** _____

City: _____ **STATE:** _____ **Zip:** _____ **County:** _____

HOME PHONE: _____ **CELL PHONE:** _____

OTHER PHONE: _____ **E-Mail:** _____

1. Are you legally eligible for employment in the United States of America?

Yes **No**

2. Have you ever pled “guilty” or “no contest” to, or ever been you been convicted of a crime?

Yes **No** **If yes, please provide date(s) and details:**

3. Georgia Driver’s License Number: _____

4. Social Security Number: _____

5. When will you be available to start: _____

6. You are willing to accept:
_____ **Full-Time** _____ **Reserve Unit**

Name of Company: _____ **From:** _____ **To:** _____

Address of Company: _____
Street City State Zip

Title / Position (list all): _____

Start Salary: _____ **Ending Salary:** _____ **Type Business:** _____

Supervisor's Name: _____ **Phone No.:** _____

Email: _____

Reason for Leaving: _____

Describe the work you did: _____

Name of Company: _____ **From:** _____ **To:** _____

Address of Company: _____
Street City State Zip

Title / Position (list all): _____

Start Salary: _____ **Ending Salary:** _____ **Type Business:** _____

Supervisor's Name: _____ **Phone No.:** _____

Email: _____

Reason for Leaving: _____

Describe the work you did: _____

Name of Company: _____ **From:** _____ **To:** _____

Address of Company:

 Street City State Zip

Title / Position (list all): _____

Start Salary: _____ **Ending Salary:** _____ **Type Business:** _____

Supervisor's Name: _____ **Phone No.:** _____

Email: _____

Reason for Leaving: _____

Describe the work you did: _____

Name of Company: _____ **From:** _____ **To:** _____

Address of Company:

 Street City State Zip

Title / Position (list all): _____

Start Salary: _____ **Ending Salary:** _____ **Type Business:** _____

Supervisor's Name: _____ **Phone No.:** _____

Email: _____

Reason for Leaving: _____

Describe the work you did: _____

SECTION 4

PERSONAL REFERENCES

List three (3) people who are not relatives, former employers, coworkers, or customers. (You may also attach letters of recommendation.) List individuals who know you personally and who will be able to give us insight into your character and personality. (All fields must be completed)

Name: _____ **Occupation:** _____

Address: _____
Street City State Zip

Phone #: _____ **Relationship to Applicant:** _____

Email: _____

Name: _____ **Occupation:** _____

Address: _____
Street City State Zip

Phone #: _____ **Relationship to Applicant:** _____

Email: _____

Name: _____ **Occupation:** _____

Address: _____
Street City State Zip

Phone #: _____ **Relationship to Applicant:** _____

Email: _____

SECTION 5

PROFESSIONAL REFERENCES

List three (3) people who are not relatives and who are not previously listed on this application as a supervisor. (You may also wish to attach letters of recommendation.) You may list other supervisors, coworkers, customers, and teachers. You should list individuals who have knowledge about your work habits, job skills, job performance and abilities. (All fields must be completed)

Name: _____ **Occupation:** _____

Address: _____
Street City State Zip

Phone #: _____ **Relationship to Applicant:** _____

Email: _____

Name: _____ **Occupation:** _____

Address: _____
Street City State Zip

Phone #: _____ **Relationship to Applicant:** _____

Email: _____

Name: _____ **Occupation:** _____

Address: _____
Street City State Zip

Phone #: _____ **Relationship to Applicant:** _____

Email: _____

SECTION 6

APPLICANT STATEMENT

I, _____ certify that all information I have provided is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to cancel further consideration of this application or immediately discharge me from the City of Fairburn's service, whenever it is discovered.

I expressly authorize, without reservation, the City of Fairburn, its representatives, employees or agents to contact and obtain information from all references, personal and professional, employers, public agencies, licensing authorities and educational institutes and to otherwise verify the accuracy of all information provided by me in this application resume or job interview.

I hereby waive any and all rights and claims I may have regarding the City of Fairburn, its agents, employees, or representatives, for seeking, gathering and using such information in the employment process and all other persons corporations or organizations for furnishing such information about me.

I understand that the City of Fairburn does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application will remain current for six (6) months. At the conclusion of that time, if I have not heard from the City of Fairburn and still wish to be considered for employment, it will be necessary to re-apply and complete a new application.

If I am hired, I understand that I will be under probationary status/working test for a minimum of one (1) year and that new employment can be terminated at will or without cause during that time.

I also understand that I am free to resign at any time, with or without cause, and without prior notice.

This application does not constitute any agreement or contract for employment for any specified period or defined duration. I understand that no supervisor or representative of the City of Fairburn is authorized to make any assurances to the contrary and that no implied, oral or written agreement contrary to the foregoing language are valid unless they are in writing and signed by the City of Fairburn's Mayor.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States of America and that federal immigration laws require me to complete an I-9 Form in the regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant

Date

PROSPECTIVE EMPLOYMENT INTERVIEW QUESTIONNAIRE

For the City of Fairburn – Police Department

Date: _____

Full Name (*Print*): _____
Last First Middle

Position Applying for:

Please read the following statement carefully before completing the questionnaire.

STATEMENT

All questions are expected to be answered honestly. This subject matter will be included in the background investigation. Misrepresentation, deliberate omission or falsification found on any of the questions will automatically disqualify the applicant from further consideration.

QUESTION 1

Is your application complete and correct, including ALL places of employment and reasons for separation?

_____ Yes _____ No

(If no, explain below)

QUESTION 2

Will working ANY shift or day be a problem?

_____ Yes _____ No

(If yes, explain below)

QUESTION 3

Have you ever been rejected for employment by a Public Safety Agency?

_____ Yes _____ No

(If yes, explain below)

QUESTION 4

Have you ever been fired or asked to resign from any employment?

_____ Yes _____ No

(If yes, explain below)

QUESTION 5

Have you ever been told by an employer that your attendance or punctuality was a problem?

_____ Yes _____ No

(If yes, explain below)

QUESTION 6

Have you ever unlawfully taken anything of value (goods or services) from an employer?

_____ Yes _____ No

(If yes, explain below)

QUESTION 7

Has anything ever kept you from performing required job duties?

_____ Yes _____ No

(If yes, explain below)

QUESTION 8

Were you ever a member of any branch of the U.S. Armed Forces?

_____ Yes _____ No (If no, skip question 9)

(If yes, explain below)

QUESTION 9

Were you ever court-martialed, tried on charges, or were you the subject of an Article 15, Summary Court Martial, Deck Court Martial, Captains Mast or Company Punishment, or any other disciplinary action while a member of the Armed Forces?

_____ Yes _____ No

(If yes, explain below)

QUESTION 10

Have you ever tried or used marijuana?

_____ Yes _____ No

(If yes, explain below)

Number of times used and approximate dates:

QUESTION 11

Have you ever tried or used ANY other drugs that are in violation of the law?

_____ Yes _____ No

(If yes, explain below)

QUESTION 12

Have you ever been involved in the sale or distribution of ANY drug including marijuana?

_____ Yes _____ No

(If yes, explain below)

QUESTION 13

Have you ever been detained or arrested?

_____ Yes _____ No

(If yes, explain below)

QUESTION 14

Have you ever been convicted of a misdemeanor or felony?

_____ Yes _____ No

(If yes, explain below)

QUESTION 15

Have you ever been granted the provisions of the First Offenders Act?

_____ Yes _____ No

(If yes, explain below)

QUESTION 16

Have you ever pled guilty or been convicted of ANY traffic violation, including D.U.I.?

_____ Yes _____ No

(If yes, explain below)

QUESTION 17

Have you ever belonged to, or participated in, any subversive or anti-government group or organization which is covered by ANY state or federal criminal code?

_____ Yes _____ No

(If yes, explain below)

QUESTION 18

Have you ever had any civil or criminal suits filed against you?

_____ Yes _____ No

(If yes, explain below)

QUESTION 19

Have you ever been garnished, had a dispossession, or other legal action filed against you for non-payment of bills or other obligations?

_____ Yes _____ No

(If yes, explain below)

QUESTION 20

Have you ever filed suit against anyone for any reason?

_____ Yes _____ No

(If yes, explain below)

QUESTION 21

Have you ever filed for bankruptcy?

_____ Yes _____ No

(If yes, explain below)

QUESTION 22

Have you falsified any document, omitted any information or misrepresented any facts on your application or resume?

_____ Yes _____ No

(If yes, explain below)

QUESTION 25

Are questions 24 and 25 in your own handwriting?

_____ Yes _____ No

(If no, explain below)

QUESTION 26

Have you answered the above questions truthfully?

_____ Yes _____ No

(If yes, explain below)

I hereby certify that all answers and subsequent statements made in this questionnaire are true, correct and complete. I further understand that any misstatement or misrepresentation of material facts will subject me to disqualification for employment consideration or dismissal from the Fairburn Police Department.

Signature

Date

**REMINDER: ALL APPLICATIONS MUST BE
TURNED IN TO THE HUMAN RESOURCES
DEPARTMENT AT CITY HALL**

Name-Based Criminal History Record Information Consent/Inquiry Form

I hereby give consent for the _____ to receive any Georgia or
 _____ Criminal Justice Agency
 III criminal history record information pertaining to me, as authorized under state and federal law for
 individuals seeking employment with a criminal justice agency.

| | | | |
|--------------------|------|---------------|------------------------|
| Full Name (print): | | | |
| Address | | | |
| Sex | Race | Date of Birth | Social Security Number |
| | | | |

This authorization is valid for 90/180/ _____ (circle one) days from date of signature.

I, _____ give consent to the above named to perform periodic
 criminal history background checks for the duration of my employment with this agency.

 Signature Date

Date of inquiry: _____ Time of inquiry: _____ Operator's Initials: _____

Purpose Code used: (check one)

| | |
|--------------------------|--|
| <input type="checkbox"/> | Civilian Employment with a Criminal Justice Agency (J) – Provides complete <i>Georgia</i> and <i>III</i> Criminal History Record Information except juvenile or restricted records and |
| <input type="checkbox"/> | P.O.S.T. Certified Employment with a Criminal Justice Agency (Z) - Provides <i>Georgia</i> and <i>III</i> Criminal History Record Information including restricted records that contain completed first offender sentences for any offense |

The inquiry resulted in the following: (check all that apply)

| | |
|--------------------------|--|
| <input type="checkbox"/> | No Georgia or III CHRI results available. |
| <input type="checkbox"/> | Georgia / III CHRI attached/released. |
| <input type="checkbox"/> | No NCIC/GCIC Warrant results available. |
| <input type="checkbox"/> | Possible NCIC/GCIC Warrant. Contact Agency listed below. |
| Wanting Agency Name: | |
| Agency Telephone: | |

 Agency Designee Signature and Title Date

**Georgia Bureau of Investigation
Georgia Crime Information Center**

Georgia Driver's History Consent Form

I hereby authorize the _____
(fire department/law enforcement agency name)

to receive a copy of my Georgia driver's history information as part of my application for criminal justice employment, or for use relative to the performance of my official duties with this agency.

Full Name (print)

Address

Sex

Date of Birth

Driver's License Number

Signature

Date

INVESTIGATION AUTHORIZATION (RELEASE) & BACKGROUND SCREENING ORDER FORM

Under the applicable provisions of the federal Fair Credit Reporting Act (FCRA), notice is hereby given that a consumer report or investigative consumer report may be requested and completed, which may include information pertaining to your employment history, educational accomplishments, criminal record, driving record, credit history (only when permitted by law and where it is related to the duties and responsibilities of the position sought), character, general reputation, and personal characteristics. This report may also include information pertaining to a commercial driver's license and commercial driving work history which, under provisions of the United States Department of Transportation, can include inquiries into drug and alcohol testing and as referenced in FMCSRs Parts 382.413 and 391.23. An investigation into your workers' compensation and/or industrial accident background may also be conducted according to the provisions of the Americans with Disabilities Act (ADA) and other federal, state, and local laws, and can be requested only after a conditional job offer has been made. This entire report will be used for employment purposes only, and will be processed by LABORCHEX Companies, an employment background screening service, located at 2506 Lakeland Drive #200, Jackson, MS 39232, 800-880-0366 (www.laborchex.com). LABORCHEX conducts business according to all applicable federal and state laws. LABORCHEX agrees to use its best and most precise efforts to furnish its clients (a "client" is defined as a business, company, or organization which contracts with LABORCHEX to provide employment background screening services to them) with accurate, current, complete, and reliable information based on such information as it is reasonably available and obtained via applicable public records sources and/or information services utilized by LABORCHEX. Sources also include contact by phone, FAX, U.S. Mail, and electronic mail of an applicant's previous employers, education officials, government agencies, and other individuals/entities who can provide accurate verification and confirmation of the applicant's background.

PRIVACY NOTE: LABORCHEX does not distribute details of employment applications or results to anyone other than the client that requested the background investigation. Information provided by applicants is held by LABORCHEX in strict confidence according to all federal laws.

You are further advised that LABORCHEX does not counsel its clients regarding their hiring policies and procedures. LABORCHEX will not have any knowledge as to why you have been offered a position or the reasons why you were denied employment. Under the provisions of the FCRA, you have the right to dispute information provided in a report and, after providing proper identification, you can request a copy of such report(s) from LABORCHEX, including details about the sources of information. Such information will be provided to you at no cost. The company, business, or organization at which you applied for a job must also provide a copy of the report to you, if you request it from them.

I, the undersigned, have read and fully understand the above notice. I hereby authorize LABORCHEX to investigate my employment history, educational accomplishments, criminal record, driving record, credit history, character, general reputation, personal characteristics, and information pertaining to a commercial driver's license and commercial driving work history, including inquiries into drug and alcohol testing and use, as well as workers' compensation information (as according to federal guidelines stated above). I authorize LABORCHEX to verify the facts stated by me on the attached/forwarded application and/or resume. I understand that this release will be valid for my entire period of employment.

Note: I understand that if I am a resident of CA, MA, ME, MN, NJ, NY, OK, and WA I can obtain a copy of the completed consumer report from LABORCHEX by checking this box { }, which will also include a document called "A Summary of Your Rights Under the Fair Credit Reporting Act (FCRA)." Please be sure to provide your full mailing address below.

Print Name: _____
Last First Middle Initial Maiden Name

Address: _____

Date of Birth: _____ Social Security #: _____

(DOB and SSN used only for identification purposes to ensure accuracy of reports)

Driver's License Number #: _____ State: _____

Date: _____ Signature: _____

BELOW IS FOR COMPANY USE ONLY

Company Name: _____ Date: _____

Applicant Name: _____ Soc. Sec. #: _____

CHECK SCREENINGS REQUIRED FOR THIS APPLICANT

- | | |
|---|--|
| <p>____ Previous Employment Verification</p> <p>____ D.O.T. (Special Screening for Commercial Drivers)</p> <p>____ Education Verification</p> <p>____ Professional/Personal References</p> <p>____ Professional License & Credential Check</p> <p>____ Official Education Transcripts</p> <p>____ CRIMINAL RECORD CHECKS (list jurisdictions below)</p> <p>____ CrimeChexPLUS Multi-State Criminal Index Check</p> <p>____ List Criminal Record Jurisdictions To Be Checked:</p> <p>____ Nationwide Federal Violations Criminal Record Check</p> | <p>____ Driving Record Check</p> <p>____ Workers' Compensation*</p> <p>____ Employment Credit Report*</p> <p>____ National Address Search & Social Security # Validation</p> |
|---|--|

NOTE: If you are not using the website to place orders, please include the completed job application (along with a copy of the this signed release) in your FAX or Email to LABORCHEX.

***When permitted by state law.**

Signature of Official Authorizing Investigation: _____

DISCLOSURE STATEMENT

PURSUANT TO FAIR CREDIT REPORTING ACT (FCRA)

By this document City of Fairburn discloses to you that a consumer report regarding your credit history, criminal history and other background information and/or an investigative consumer report containing information as to your character general reputation, personal characteristics and/or mode of living may be obtained from consumer reporting agencies, personal interviews or other sources in connection with your application for employment or any time during your employment (including independent contractor assignments, as applicable). The information obtained shall be used solely for the purpose of evaluating you for employment, promotion, reassignment, or retention as an employee or independent contractor.

All terms are used as defined in the FCRA, 15 U.S.C. § 1681 et seq.

**AUTHORIZATION TO PROCURE A CONSUMER REPORT OR
INVESTIGATIVE CONSUMER REPORT**

I HEREBY authorize City of Fairburn or those authorized by them to procure consumer reports and/or investigative consumer reports on me in connection with my application for employment or any time during my employment, which shall be used solely for the purpose of evaluating me for employment, promotion, reassignment, or retention as an employee or as an independent contractor. I understand that reports may include information about my prior employment, D.O.T. commercial driver experience as outlined in Parts 382.413, 391.23 and 391.25 of the Federal Motor Carrier Safety Regulations (FMCSRs), driving records, military record, education, credit worthiness and history, character, general reputation, criminal record, and mode of living, residency, general reputation, personal characteristics, performance, experience, reasons for termination of past employment and other qualities pertinent to my qualifications for employment.

I understand that this information may be obtained through a variety of sources, including, but not limited to, public records, educational institutions, financial institutions, credit bureaus, consumer reporting agencies, and personal interviews with my current and former employers, friends, neighbors and associates. I understand that upon written request to City of Fairburn, I will be informed whether an investigative consumer report was requested and given information as to the nature and scope of the investigation requested. I understand that upon written request to City of Fairburn, a copy of this Authorization will be provided to me.

_____ Date: _____ Time: _____
Print Name:

Signature: _____

CALIFORNIA, MINNESOTA AND OKLAHOMA RESIDENTS ONLY:

I wish to receive a free copy of any Consumer Report and/or Investigative Consumer Report concerning me that is requested.