FIRST CONTACT

Full Service Pre-Employment Screening, Testing & Verification

Minor Applicant Notice and Consent Document

First Contact HR Fax Number: 267-419-1396
Client Name: Arbutus Volunteer Fire Department **Client Code: ARBVOL**
Service Code: ResidenceCrim ☐ ResidenceCrimM ☐
OTHER _____ ☐ *(please select)*

Authorized Agent: _____ Time/Date Sent: _____

NOTICE TO JOB APPLICANTS

Your employer has contracted with **First Contact HR** to verify certain information contained in your application for employment **(including contract for services)** or provided by you during the interview process. The information requested below is necessary to complete this task. This information is **NOT** a part of the application for employment and will be used for the sole purpose of verification of information, and or statements made by you. ***Please complete all information requested.***

APPLICANT'S LEGAL NAME: _____
Last Name First M.I. Generation

PHONE #: E-MAIL ADDRESS: _____

CURRENT HOME ADDRESS: _____
Street City/State Zip

MOVE IN DATE: (Mo / Yr) FORMER NAME / MAIDEN NAME: _____

DATE OF BIRTH: Month/Day/Year SOCIAL SECURITY # _____

DRIVER'S LICENSE #: STATE OF ISSUANCE: _____

ADDRESS HISTORY: List all former addresses of residence within the past 7 years, beginning with the most recent and working back (if additional space is needed, please provide a second page):

Number & Street Address	City	State / Zip	Dates of Residence
Number & Street Address	City	State / Zip	Dates of Residence
Number & Street Address	City	State / Zip	Dates of Residence

It is possible that your employment may be determined in whole or in part by your employer using data from a report supplied by **First Contact HR,** 1035 Virginia Drive, Suite 204, Fort Washington, PA 19034. Pursuant to Section 609 of the Fair Credit Reporting Act, you may be entitled to a copy of this report.

APPLICANT CONSENT: I understand and agree that **First Contact HR** will verify all or part of the information I have given my employer. I understand that this verification may include an inquiry into my credit history, driving record, criminal and civil records, felony & misdemeanor and deferred adjudication records, prior employment (including contacting prior employers), education (degree, GPA and attendance) as well as other public record information. I understand I may be required to provide a sample (either urine or hair) for a screening for illegal drugs. If hired or contracted, this authorization shall remain on file and shall serve as ongoing authorization for the procurement of consumer reports at any time during my employment or contract period. I authorize the release of such information as may be necessary to verify the information I have provided.

APPLICANT SIGNATURE: _____ DATE: _____.

PARENT SIGNATURE: _____ DATE: _____