

**DISD 2008 BOND PROGRAM CONSENT and NOTIFICATION FORM**

**Client Name:**  
**Branch Code:**

**Client Code:**  
**Service Code:**

Authorizing Signature \_\_\_\_\_

In order to maintain a safe working environment, **DISD** has mandated the verification of certain personal information and characteristics. Please proceed to one of the FC BACKGROUND® facilities. While at this facility, you will be asked to provide pertinent background information. You may also be required to provide a urine sample for a drug screen. **FC Background is required to verify each individual's SSN.** Please be prepared to provide valid Government-issued photo identification and the following information:

LEGAL NAME:

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First

\_\_\_\_\_  
M.I.

CURRENT ADDRESS:

\_\_\_\_\_  
Street

\_\_\_\_\_  
City/State

\_\_\_\_\_  
Zip

DATE OF BIRTH:

\_\_\_\_\_  
Month/Day/Year

SOCIAL SECURITY #

DRIVER'S LICENSE #:

STATE OF ISSUANCE:

DAYTIME PHONE#:

EVENING PHONE #:.

**CONSENT:** I understand and agree that FC Background, LLC will verify all or part of the information I have given my employer/prospective employer. I understand that this process **may** include any inquiry into my credit history, motor vehicle driving record, criminal and civil records, a drug test, prior employment (including contacting prior employers), education (degree, GPA and attendance) as well as other public record information. I authorize the release of such information as may be necessary to verify the information I have provided. I release and hold harmless from all liability any individual or entity requesting or supplying information.

I further understand that my employer/prospective employer and FC Background have developed the WorkerCheck Program whereby applicants and employees will be screened and the results measured in accordance with certain agreed upon standards.

Employees meeting the standards will be enrolled in the WorkerCheck Program. Participants will be issued an ID Badge bearing the person's digital photo, logos of both **DISD** and WorkerCheck, the employer's name, and a Confirmation number. FC Background will maintain a web site where your employer and **DISD** can enter the Confirmation number and view a digital photo of the employee and the dates and results of the background screen.

I understand and agree to the following:

1. My photo may be used for identification purposes. My picture and name may appear on the WorkerCheck website.
2. Drug testing results may be shared with the Owner or General Contractor upon request.
3. I may be re-screened periodically for purposes of continued participation in the WorkerCheck Program.
4. If at any time during participation, I fail to meet the established minimum standards, my participation in the WorkerCheck Program may be suspended or eliminated.
5. In the event my participation in the Worker Check Program is suspended or terminated I will immediately return the photo ID badge to my employer or their authorized representative.

It is possible that your employment may be determined in whole or in part by your prospective employer using data from a report supplied by FC Background, LLC. Dallas, TX. Pursuant to Section 609 of the Fair Credit Reporting Act, you may be entitled to a copy of this report.

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

## FC Background Facility Locations

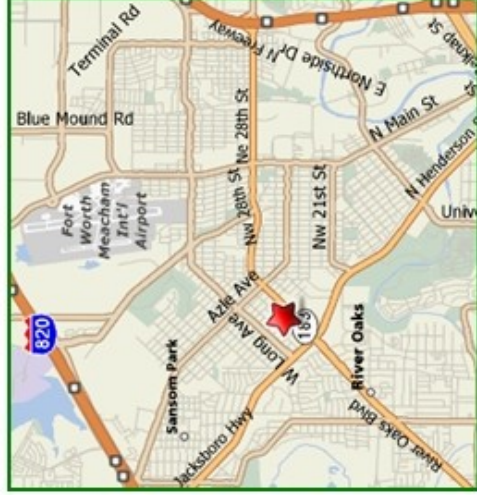
**Dallas: M – F | 7:30am - 5pm**

2600 N. Stemmons #162  
Dallas, TX 75207  
Ph (214) 920-8490 / Fax (214) 951-7499



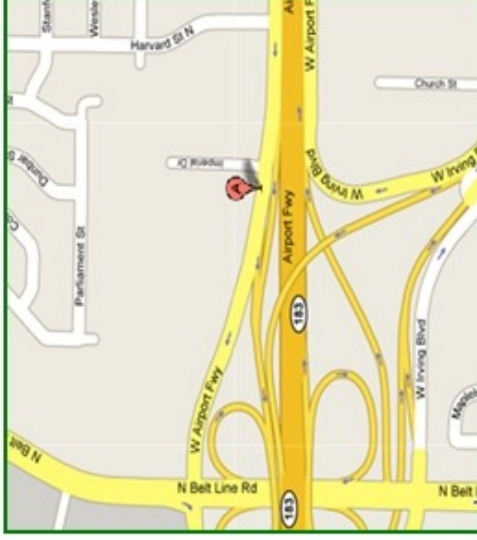
**Fort Worth: M – F | 8am - 5pm**

1926 Ephriham Ave  
Ft. Worth, TX 76184  
Ph (817) 740-8779 / Fax (817) 740-0788



**Irving: M – F | 8am - 5pm**

3225 W. Airport Freeway, Ste. 226  
Irving, TX 75062  
Ph (972) 255-3101 / Fax (469) 417-0779



**Richardson: M – F | 8am - 5pm**

1715 Analog Dr  
Richardson, TX 75081  
Ph (972) 231-5550 / Fax (972) 480-9042



**Houston: M – F | 8am - 5pm**

5201 Mitchelldale St, Ste. B14  
Houston, TX 77092  
Ph (713) 316-0707 / Fax (713) 316-0354

