Agency Background Check Request Form

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| **Applicant Information** |
| Please type or print legibly. |
| **Last Name**      | **First Name**      | **Middle**      |
| **Indicate Other Alternative Names:**      |
| **Address**      |
| **City**      | **State**      | **Zip Code**      |
| **Social Security Number**      | **Driver’s License Number**      | **State Driver’s License Issued**      | **Date of Birth**      |
| **Criminal Background Check Services** |
| **Criminal Check (select one):** |
| [ ]  Essentials Criminal Package [ ]  Global Criminal Search  |
| **County Criminal Check (list applicable counties – worked/resided):** |
| County #1:      | County #2:       | County #3:       | County #4:       |
| **Social Security Number Trace:** [ ]  Yes [ ]  No |
| **Additional Background Check Services** |
| **Additional Services (the department may request these additional services and may ask for documents supplying the required information.)**[ ]  Employment Verification [ ]  Education Verification [ ]  Credit History Check [ ]  Military Service Record [ ]  Professional License Verification  |
| **Privacy Notification** |
| The State of California, Information Practices Act of 1977 (effective July 1, 1978) requires the university to provide the following information to individuals who are asked to supply information about themselves.The principal purpose for requesting the information on this form is to conduct job-related background checks on candidates recommended for hire into a critical position. Critical positions include functions with the potential to incur human, financial, property loss, or other significant risk to the university and its constituents. University policy and federal statute authorize the maintenance of this information.Furnishing all information requested on this form is mandatory. Failure to provide such information shall result in a determination that the applicant is ineligible for employment or not appropriate for reassignment from non-critical to a critical position. The information on this form will be transmitted to the federal and state governments as required by law. Individuals have the right to review their own records. |