



Permission to Obtain Background Check

I, the undersigned applicant (also known as “consumer”), authorize Ovilla Christian School through its independent contractor, First Advantage, to procure background information (also known as a “consumer report and/or investigative consumer report”) about me. This report may include my driving history, including any traffic citations; a social security number verification; present and former addresses, criminal and civil history/record; and the state sex offender records.

I understand that I am entitled to a complete copy of any background information report of which I am the subject upon my request to Ovilla Christian School, if such is made within a reasonable time for the date it was produced. I also understand that I may receive a written summary of my rights under the Fair Credit Reporting Act.

Please attach \$10 to this form. All checks are payable to OCS. This background check will be valid for 2 years.

Signature: _____ **Date:** _____

PRINT Name: _____
(First) (Middle) Last)

Other Names Used (alias, Maiden, nickname): _____

Current Address:	

Street/P.O. Box	

City	
_____	_____
State	Zip Code

Former Address:	

Street/P.O. Box	

City	
_____	_____
State	Zip Code

Date of Birth: _____

Social Security No. _____ - _____ - _____

Drivers License No. _____

Reason for Background Check :

_____ Field Trip/Please indicate relationship to child: _____

_____ Volunteer

Office Use Only

Approval Date: _____ **Denial Date:** _____

Submitted Date: _____ **ID #:** _____