



HEALTHCARE EMPLOYMENT SCREENING DISCLOSURE AND RELEASE

Convenient Home Care Services Inc.

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In connectin with my application for employment (including contract for services with Convenient Home Care Services, Inc.

I hereby fully release and discharge you and Healthcare Employment Screening (HES), their respective affiliates, subsidiaries, directors, officers, employees, agents and attorneys thereof, and each of them, and any individual, organization, entity, agency, or other source providing information to above named employer and/or HES from all claims and damages arising out of or relating to any investigation of my background for employment purposes.

I have been provided a copy of the summary of the rights of the consumer pursuant to Fair Credit Reporting Act (FCRA), and have also been provided a disclosure that an investigative consumer report will be sought pursuant to FCRA.

In connection with my application for employment (including contract for services) with you, I understand that an investigative consumer report and consumer reports which may contain public record information may be requested from **Healthcare Employment Screening**, 4500 S. 129th E. Avenue, Suite 200, Tulsa, OK 74134-5885. These reports may include the following types of information: names and dates of previous employers, reason for termination of employment, work experience, any information relating to character, general reputation, personal characteristics, mode of living, educational background, or any other information about me which may reflect upon my potential for employment gathered from any individual, organization, entity, agency, or other source which may have knowledge concerning any such items of information. I further understand that such reports may contain public record information concerning my driving record, workers' compensation claims, criminal records, etc., from federal, state and other agencies which maintain such records.

*You have the right to receive from **Convenient Home Care Services, Inc.**, upon your written request within a reasonable period of time, a complete and accurate disclosure of the nature and scope of the investigation requested.*

I hereby authorize and give my consent to the above company for the procurement of consumer report(s). If hired (or contracted), this authorization will remain on file and shall serve as ongoing authorization for you to procure consumer reports at any time during my employment (or contract) period.

For purposes of gathering this information, I agree to supply for following information:

Date of Birth _____ Male Female

Drivers License Number _____ State _____

Applicant's Signature _____

Social Security Number _____

Applicant's Name (Please Print) _____

Date _____