TANGIPAHOA PARISH SHERIFF'S OFFICE CREDIT AND BACKGROUND INVESTIGATION ACKNOWLEDGEMENT

Daniel H. Edwards, Sheriff

I understand and acknowledge that in connection with my application for employment, a thorough background investigation will be conducted by the Tangipahoa Parish Sheriff's Office. In connection with this investigation, I understand and consent to the Sheriff's Office obtaining a credit report concerning me.

I understand that, consistent with the requirements of the position for which I am applying, as determined by Tangipahoa Parish Sheriff's Office, the investigation into my background may entail inquires involving public and private sources, including a consumer report. I understand that this investigation and these reports may include, but not limited to, information such as my financial history and obligations, my character, education, criminal and civil history, driving history, property ownership, work habits, job performance and experience, along with reasons for termination of past employment. My neighbors, friends, family, employers, co-workers, teachers, and others may be interviewed.

I understand that according to the Fair Credit Reporting Act, if employment is denied because of information obtained by my prospective

employer from a consumer r					tion obtained by my prospective he name of the agency.	
In consideration of my applic	cation for employm	ent, I consent to the	e above-described ir	nvestigation.		
SIGNATURE			DATE			
In the event you are select personal identifying informa nformation or personal histo permit the Tangipahoa Pari	ted for further pro tion and extensive ory data at this time ish Sheriff's Office on. Disclosure of the	cessing in connecti personal history da e; however, you ma to expedite its inq ne below listed info	on with this employ ata. The Sheriff's C y voluntarily elect to uiry into criminal ar rmation is not comp	Office does not require yo o provide some additional nd civil records, which ca	be necessary for you to provide u to disclose personal identifying information at this time. This will an be time consuming and delay ur application for employment will	
record checks. These record	rds checks are use	d for the purpose (of determining your	eligibility for employmen	connection with criminal and civil it in security and safety sensitive a secure manner, and will not be	
Please print your full name:	se print your full name: Last		First		Jr./Sr./III	
Please print all other names	you have used:	Last	First	Middle	Maiden Maiden	
Social Security Number:						
Date of Birth:	1 1	Place of E	Birth:			
Oriver's License Number:			State of Issue:		Expiration date:	
Previous Residence. List City	y/State where you	nave resided. List y	our most current re	sidence first and work bac	kwards.	
CITY		STATE	FROM	M (month/year)	TO (month/year)	
Race (This data is collected to the collected of the coll	anic $\ \square$	Black concerning any ma	☐ White tter that you feel the	Otherinvestigator should know	<i>i</i> prior to conducting a	
I acknowledge that I have p	rovided the above p	personal identifying	information on a vo	luntary basis at this time.		
SIGNATURE				DATE		
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