Goodwill Industries of Northern Michigan
Background Check Authorization Form

I hereby authorize and request any present or former employer, school, credit agency, financial institution, law enforcement agency, city, state, county and federal court and/or agency, military service or other persons having personal knowledge about me to furnish Goodwill Industries of Northern Michigan with any and all information in their possession regarding me in connection with an application for employment or program participation. I am willing that a photocopy of this authorization be accepted with the same authority as the original, and I specifically waive any written notice from any present or former employer who may provide information based upon this authorized request. I understand this authorization is to be part of the written employment application that I sign.

This notice serves as consumer notification that a report will be requested and used for the purpose of evaluating me for employment, promotion, reassignment, program participant, volunteering or retention as an employee.

I understand that any offer of employment or program participation from Goodwill Industries of Northern Michigan, is contingent upon the results of an acceptable background check and, if applicable, acceptable driving record.

Requesting Department/Manager:_____

Purpose of check (check only one): ___Employment ___ Volunteer (Retail Store Only)

___ Community service ___ Program Participant

Date:_____

PLEASE WRITE LEGIBLY

Print Applicant's Full Name (first, middle and last):_____

Maiden Name, Print Applicant's (first, middle and last):_____

Applicant's Signature:_____

For identification Purposes Only:

Date of Birth:_____ Gender _____Male or_____Female

Current Street Address:_____

Current City, State, Zip Code:_____

Current Telephone Number:_____

Race/Ethnicity: __ American Indian ___Asian __Black __Hawaiian or Pacific Islander

__Hispanic __Two or More Races __White

Please list other states in which you have lived in the preceding 10 years: _____

_____