

copy of the report by checking this box:  $\square$ .

## **Consumer Authorization**

**Authorization:** By signing below, you authorize: (a) General Information Services, Inc. ("GIS") to request information about you from any public or private information source; (b) anyone to provide information about you to GIS; (c) GIS to provide us (RMHC of Maine) one or more reports based on that information; and (d) us to share those reports with others for legitimate business purposes related to your employment. GIS may investigate your education, work history, professional licenses and credentials, references, address history, social security number validity, right to work, criminal record, lawsuits, driving record, credit history, and any other information with public or private information sources. You acknowledge that a fax, image, or copy of this authorization is as valid as the original. You make this authorization to be valid for as long as you are an applicant or employee with us.

The Consumer Financial Protection Bureau's "Summary of Your Rights under the Fair Credit Reporting Act" is attached to this authorization. If you are a New York applicant, a copy of New York's law on the use of criminal records is attached. By signing below, you acknowledge receipt of these documents.

Full name	Maiden name/ali	ases	
Address	City	State Zip	
Date of birth	Social Security No	Social Security Number	
	a crime? 🗖 No 🗖 Yes If yes, please pro	ovide city and state, date, and type	
Have you ever been convicted of a conviction:	a crime?	ovide city and state, date, and type	