

AUTHORIZATION TO OBTAIN CONSUMER REPORT & RELEASE OF LIABILITY

I hereby authorize The Western Pennsylvania Hospital to obtain a consumer report as part of my pre-employment background investigation. I consent to allow The Western Pennsylvania Hospital to hire Base International or other consumer reporting agency to obtain such consumer report that shall include a criminal background check.

I understand that this criminal background check will include criminal convictions on file in the Commonwealth of Pennsylvania and/or other states in which I have resided, as well as other jurisdictions deemed appropriate by The Western Pennsylvania Hospital. I also consent to an investigation of my personal history, educational background, and military record through Base International or other investigative or credit agency or bureau retained by The Western Pennsylvania Hospital as it deems appropriate.

I understand that this authorization shall remain on file and shall serve as an ongoing authorization for The Western Pennsylvania Hospital to obtain consumer reports at any time during my employment with the West Penn Allegheny Health System.

I hereby release The Western Pennsylvania Hospital, Base International and other consumer reporting agencies hired by The Western Pennsylvania Hospital and all employers and persons named in my employment application from all liability for any damages on account of furnishing information to The Western Pennsylvania Hospital.

PRINT OR TYPE ALL INFORMATION

Full Name: _____ Phone #: _____

Father's Full Name: _____

Other Names Used & Dates Used: _____

Current Address: _____

List All Addresses for Past 7 Years:

| | |
|-------|--------------|
| _____ | Dates: _____ |
| _____ | Dates: _____ |
| _____ | Dates: _____ |
| _____ | Dates: _____ |

Social Security #: _____ Date of Birth (month/day/year): _____

Gender: Male _____ Female _____

Drivers License #: _____ State: _____

Have you ever been convicted of or pleaded guilty to any felony, DUI, or misdemeanor? Yes _____ No _____

If you answered Yes to the above, please describe in detail (a past conviction does not necessarily prevent you from being considered for employment). **If you are selected for employment and have failed to respond to these questions accurately and/or completely, your employment will be terminated.**

Signature: _____ Date: _____