



# **Applicant Disclosure and Background Check Authorization Form**

I understand that the Dream Centers of Colorado Springs (DCCS) may seek and obtain investigative reports about me as defined in the Fair Credit Reporting Act (FCRA). These investigative reports may include—but are not limited to—consumer credit reports, criminal history records (from local, state, and federal agencies), sexual offender’s lists, wants and warrants records, and motor vehicle records. I hereby authorize, without any reservation, the full release of these records from such agencies and hereby release such agencies from any liability resulting from disclosure of this information. In addition, I release and discharge DCCS from any expenses, losses, damages, and liabilities for the investigative process. Upon request, DCCS will supply a copy of my reports and my rights under the FCRA. Requests may be directed to: Dream Centers of Colorado Springs — 4360 Montebello Drive, Suite 900 — Colorado Springs, CO 80918 | Phone 719.388.1594. I understand that if reports stated above are not requested, this form will be destroyed.

**Applicant Signature**

**Date (Month, Date, and Year)**

**Full Name (Printed)**

**All Aliases (Last Name Only)**

**Applicant Maiden Name (Printed)**

**Month/Year Married**

**Date of Birth (Month, Date, and Year)**

**Place of Birth (City and State or Country)**

**Social Security Number**

**Driver’s License Number**

**State**

**Date Moved to CO (Mo/Year)**

**Home Address**

**City**

**State**

**Zip Code**

**Home Phone**

**Work Phone**

**Cell Phone**

**Primary Phone**  Home  Work  Cell

**Is it OK to contact you at work?**  Yes  No

**Email Address**

\* If you have lived in Colorado for LESS THAN 3 YEARS, please complete the information on the 2<sup>nd</sup> page of this form.  
**Submitted By:** DCCS — 4360 Montebello Drive, Suite 900 — Colorado Springs, Colorado 80918.



# Applicant Disclosure and Background Check Authorization Form (continued)

If you have lived in Colorado for LESS THAN 3 YEARS, please fill in the following information, beginning with the most recent STATE you lived in before moving to Colorado and ending with the STATE you lived in 10 years ago.

<b>Date From (Month &amp; Date)</b>	<b>To (Month &amp; Date)</b>	<b>Zip Code</b>	<b>Last Name During This Time</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>City</b>	<b>State</b>	<b>County</b>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

<b>Date From (Month &amp; Date)</b>	<b>To (Month &amp; Date)</b>	<b>Zip Code</b>	<b>Last Name During This Time</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>City</b>	<b>State</b>	<b>County</b>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

<b>Date From (Month &amp; Date)</b>	<b>To (Month &amp; Date)</b>	<b>Zip Code</b>	<b>Last Name During This Time</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>City</b>	<b>State</b>	<b>County</b>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

<b>Date From (Month &amp; Date)</b>	<b>To (Month &amp; Date)</b>	<b>Zip Code</b>	<b>Last Name During This Time</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>City</b>	<b>State</b>	<b>County</b>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

<b>Date From (Month &amp; Date)</b>	<b>To (Month &amp; Date)</b>	<b>Zip Code</b>	<b>Last Name During This Time</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>City</b>	<b>State</b>	<b>County</b>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

<b>Date From (Month &amp; Date)</b>	<b>To (Month &amp; Date)</b>	<b>Zip Code</b>	<b>Last Name During This Time</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>City</b>	<b>State</b>	<b>County</b>	
<input type="text"/>	<input type="text"/>	<input type="text"/>	