

Superior
Employment
Screening



Employer Agreement Consumer Report Authorized Access Agreement

To be completed by employees authorized to request pre-employment screening.

I understand that as a designated representative of my employer, I am authorized to request and receive consumer reports from Superior Employment Screening.

I hereby agree that I shall only request consumer reports on applicants for employment or on employees for legitimate employment purposes. I further agree not to obtain these reports on myself, associates or any other person except in the exercise of my official duties for and on behalf of my employer and only for lawful purposes.

I agree not to share information from these reports with any other person who is not authorized or have official responsibility to receive such reports.

I understand that the Fair Credit Reporting Act (FCRA) stipulates that anyone who knowingly and willfully obtains information on an individual from a consumer reporting agency under false pretenses shall be subject to fine and/or imprisonment.

I hereby indemnify my employer, _____ (company name) and Superior Employment Screening from any actions on my part deemed unlawful by the provisions of the Fair Credit Reporting Act.

Name:

(Please print)

Signature:

Date: