



# Labouré College

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You are required to present a government issued photo ID  
(in person ONLY)

\_\_\_\_\_  
\*Last Name

\_\_\_\_\_  
\*First Name

\_\_\_\_\_  
\*Middle Name

\_\_\_\_\_  
Suffix

\_\_\_\_\_  
Maiden Name (or other LAST NAMES you have used in the past 5 years)

\_\_\_\_\_  
\*Date of Birth

\_\_\_\_\_  
Place of Birth

\*Last Six Digits of Your Social Security Number: \*\*\* - \_\_\_\_\_ - \_\_\_\_\_

Sex: \_\_\_\_\_ Height: \_\_\_\_\_ ft. \_\_\_\_\_ in. Eye Color: \_\_\_\_\_ Race: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State of Issue: \_\_\_\_\_

\_\_\_\_\_  
Mother's Full Maiden Name

\_\_\_\_\_  
Father's Full Name

**Current and Former Addresses (IN THE PAST 5 YEARS):**

\_\_\_\_\_  
Street Number & Name City/Town State Zip

\_\_\_\_\_  
Street Number & Name City/Town State Zip

**\*HR/Internal Use Only**

The above information was verified by reviewing the following form(s) of government issued identification:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify that LABOURÉ COLLEGE, INC. is in compliance with all applicable state and federal consumer reporting statutes, and will not misuse any information in violation of federal or state equal employment opportunity laws.

VERIFIED BY: \_\_\_\_\_  
Name of Verifying Employee (Please Print)

\_\_\_\_\_  
\*Signature of Verifying Employee

\*Permissible Purpose: ☒ Clinical student w/access to kids or patients ☐ Employment: Applicant  
☐ Employment: Current Employee ☐ Employment: Sub-contractor ☐ Volunteer/Interns: Applicant  
☐ Volunteers/Interns: Current

\*This individual is reasonably expected to earn annually: ☐ Over \$75,000 ☐ Under \$75,000

\*Required Field \*Required Field

rev: 7.2.15md

**Background Investigation & Release of Information Authorization**

I, \_\_\_\_\_, hereby authorize, without reservation, PT Research and any party or agency contacted by PT Research, to furnish the above information. I further release and forever discharge LABOURÉ COLLEGE, PT Research, and any person/entity from which they obtained information from any liability resulting from providing such information.

I understand that this information will be transmitted electronically and authorize such transmission. I am willing that a photocopy of this authorization be accepted with the same authority as the original, and that if employed by LABOURÉ COLLEGE this authorization will remain in effect throughout my employment.

_____ Signature	_____ Social Security Number	_____ Date	
_____ Last Name	_____ First Name	_____ Middle Name	
_____ Street Address	_____ City	_____ State	_____ ZIP
_____ Driver's License Number	_____ State of License	_____ Expires On	_____ Date of Birth

\_\_\_\_\_  
List any other CITIES AND STATES in which you have lived during the previous 7 years.

\_\_\_\_\_  
List any other LAST NAMES you have used during the previous 7 years.

\_\_\_\_\_  
List any other LAST NAMES under which you received your GED, high school diploma, or other degrees.

**Consumer Report / Investigative Consumer Report  
Disclosure and Authorization**

I understand that, in connection with my application for employment or at any time during my employment, **LABOURÉ COLLEGE** may conduct a background investigation on me for employment purposes.

I understand **LABOURÉ COLLEGE** may utilize PT Research, Inc., a consumer-reporting agency, to prepare a consumer report or investigative consumer report, as defined under the Fair Credit Reporting Act (15 U.S.C. § 1681, *et seq.*), in connection with the background investigation. A “consumer report” means any written, oral, or other communication of any information by a consumer reporting agency bearing on my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living, which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in establishing my eligibility for employment purposes. An “investigative consumer report” means a consumer report or portion thereof in which information on my character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with my neighbors, friends, or associates or with others with whom I am acquainted or who may have knowledge concerning any such items of information. Information for a consumer or report and/or investigative consumer report may be retrieved from several sources, including but not limited to public records, educational institutions, financial institutions, law enforcement and other government agencies, credit bureaus, and personal interviews with my current and former employers, friends, neighbors and associates. The information received may include, but is not limited to, academic, residential, achievement, job performance, attendance, litigation, personal history, credit reports, driving history, and criminal history records consistent with federal and state law. I understand that this information may be transmitted electronically and I authorize such transmission.

I further acknowledge that I may access and download a "Summary of Your Rights Under the Fair Credit Reporting Act," at [my.laboure.edu](http://my.laboure.edu). In the event an investigative consumer report is prepared, I understand that I may submit a written request for additional disclosures regarding the nature and scope of the investigation requested as well as a summary of my rights under the FCRA.

If information from a consumer report or an investigative consumer report is used in whole or in part in making an *adverse decision* concerning my employment or application for employment, before making the adverse decision **LABOURÉ COLLEGE** will provide me with a copy of the consumer report or investigative consumer report and a description in writing of my rights under the Fair Credit Reporting Act.

I understand that if I disagree with the accuracy of any information contained in the report, I must notify **LABOURÉ COLLEGE** within 10 days of my receipt of the report.

**AUTHORIZATION**

I hereby authorize **LABOURÉ COLLEGE** to obtain a consumer report and/or an investigative report about me. If I am hired by **LABOURÉ COLLEGE**, this authorization shall remain on file and shall serve as an ongoing authorization for **LABOURÉ COLLEGE** to procure consumer reports and/or investigative consumer reports at any time during my employment. I agree that a photocopy of this authorization may be accepted with the same authority as the original.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**CRIMINAL OFFENDER RECORD INFORMATION (CORI)  
ACKNOWLEDGEMENT FORM**

TO BE USED BY ORGANIZATIONS USING CONSUMER REPORTING AGENCIES TO CONDUCT CORI CHECKS FOR EMPLOYMENT, VOLUNTEER, SUBCONTRACTOR, LICENSING, AND HOUSING PURPOSES

**LABOURE COLLEGE, INC.** is registered under the provisions of M.G.L. c. 6, § 172 to receive CORI for the purpose of screening current and otherwise qualified prospective employees, subcontractors, volunteers, license applicants, current licensees, and applicants for the rental or lease of housing. **LABOURE COLLEGE, INC.** has authorized **PT RESEARCH, INC.** to submit CORI checks to the Massachusetts Department of Criminal Justice Information Services (DCJIS) on its behalf.

As a prospective or current employee, subcontractor, volunteer, license applicant, current licensee, or applicant for the rental or lease of housing, I understand that a CORI check will be submitted for my personal information to the DCJIS. I hereby acknowledge and provide permission to **PT RESEARCH, INC.** to submit a CORI check for my information to the DCJIS. This authorization is valid for one year from the date of my signature. I may withdraw this authorization at any time by providing **LABOURE COLLEGE, INC. & PT RESEARCH, INC.** with written notice of my intent to withdraw consent to a CORI check. I also understand that this form is a CORI acknowledgement form and I am entitled to additional consumer reporting disclosure forms under the Fair Credit Reporting Act. If I have not received those disclosures, I should contact **PT RESEARCH, INC.** to request this information.

FOR EMPLOYMENT, VOLUNTEER, AND LICENSING PURPOSES ONLY: **PT RESEARCH, INC.** on behalf of **LABOURE COLLEGE, INC.** may conduct subsequent CORI checks within one year of the date this Form was signed by me provided, however, that **LABOURE COLLEGE, INC. & PT RESEARCH, INC.** must first provide me with written notice of this check.

By signing below, I provide my consent to a CORI check and acknowledge that the information provided on Page 2 of this Acknowledgement Form is true and accurate.

\_\_\_\_\_  
\*SIGNATURE

\_\_\_\_\_  
\*DATE



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[www.ptresearchinc.com](http://www.ptresearchinc.com)

## **PT Research and Labouré College**

### **Who is PT Research?**

PT Research is a consumer-reporting agency based in Manchester, NH. Labouré College contracts PT Research to administer criminal background checks/CORI, Social Security Number verifications, and credential verification services. PT Research ensures all reports it prepares for Labouré College are transmitted and stored securely, and in full compliance with the Fair Credit Reporting Act and applicable state reporting and data security regulations.

### **What is a Consumer Report?**

The Fair Credit Reporting Act defines a consumer report as any communication by a consumer reporting agency relating to an individual's character, reputation, or personal history and to be used as a factor in establishing the individual's eligibility for employment. PT Research considers all reports we prepare to be consumer reports, even in the case of a volunteer or physician who is not technically employed by our clients. This ensures that everybody we screen is afforded the same legal protections as employees. Please note that though we reference "credit reports" in our release form and legal citations, the Fair Credit Reporting Act covers much more than just credit reports.

### **Why do I need to sign a secondary release form?**

The Fair Credit Reporting Act requires a "clear and conspicuous disclosure" to the consumer that a consumer report will be prepared, and the consumer must authorize the consumer report in writing. The Massachusetts CORI form alone does not meet these disclosure and authorization requirements, so PT Research requires a separate Disclosure and Release of Information Authorization to fully comply with the FCRA.

### **How does PT Research obtain its information?**

Reports for Labouré College are limited in scope to criminal records, a Social Security Number verification, and credential verifications. The Social Security Number verification is obtained from a number of public record sources including phone books and credit bureau data (credit bureau data is limited to a history of addresses and name changes, and does *not* include any financial data whatsoever). Criminal record searches are conducted through the Massachusetts Department of Criminal Justice Information Services and county courts. Credential verifications are conducted via oral or written inquiries to primary sources, such as educational institutions.

### **How does PT Research protect my personal information?**

All our staff is background-checked annually and thoroughly trained regarding the proper, safe handling of consumer information. All electronic data is secured behind robust firewalls and access connections are encrypted using Verisign's industry-leading data encryption methods. A copy of our privacy policy is available upon request.