



## **TEAM Background Sample Pre-Adverse and Adverse Action Notices**

For compliance with the federal Fair Credit Reporting Act (FCRA) as well as state and local laws, employers must provide certain pre-adverse and adverse action notices to consumers prior to taking any adverse action based, in whole or in part, on information in a consumer report. "Adverse Action" includes a denial of employment or any other employment decision adversely affecting an applicant/employee.

This packet contains several sample documents that are aimed at providing a starting point for you as you determine how to best meet your obligations as an employer under applicable laws. For ease of reference, these sample documents can also be found within the TEAM Background system under "Docs & Forms."

These sample documents are provided for educational purposes ONLY and should NOT be construed as legal advice, guidance, or counsel. You should consult with your own attorney(s) about your compliance responsibilities under the FCRA as well as under other federal, state, and local laws and should consult with your attorney(s) before using any sample. TEAM Background, LLC expressly disclaims any warranties, responsibility, or damages associated with or arising out of the information or samples provided. Further, for employers seeking credit reports or information, additional notices may be necessary.

You are responsible for the content of any documents provided to your candidates and employees.

### **Federal Documents:**

1. Pre-Adverse Action Notice
2. Adverse Action Notice

Ensure you include all enclosures referenced in the letters, including the Federal Summary of Your Rights Under the Fair Credit Reporting Act.

### **State & Local Documents:**

Some jurisdictions may require specific state or local pre-adverse and/or adverse action notices ***in place of*** the federal sample documents provided above. TEAM Background, LLC has included several additional sample documents that may be relevant; however, you should consult with your own attorney(s) about your compliance responsibilities under the FCRA as well as under other federal, state, and local laws and should consult with your attorney(s) before using any sample.

1. ***Gainesville, Florida*** – Local Pre-Adverse Action Notice and Local Adverse Action Notice
2. ***Los Angeles, CA*** – Local Pre-Adverse Action Notice and Local Adverse Action Notice
3. ***Montgomery County and Prince George's County, Maryland*** – Local Pre-Adverse Action Notice
4. ***New York City, New York*** – Local Pre-Adverse Action Notice and Local Adverse Action Notice
5. ***Philadelphia, Pennsylvania*** – Local Pre-Adverse Action Notice
6. ***Portland, Oregon*** – Local Pre-Adverse Action Notice

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7. ***San Francisco, California*** – Local Pre-Adverse Action Notice
8. ***Seattle, Washington*** – Local Pre-Adverse Action Notice
9. ***California (outside Los Angeles and San Francisco)*** –
10. **Adverse Action Not Based on Criminal History:** State Pre-Adverse Action Notice and State Adverse Action Notice
11. **Adverse Action Based on Criminal History:** State Pre-Adverse Action Notice Based on Criminal History and State Adverse Action Notice Based on Criminal History
12. ***Illinois*** – State Pre-Adverse Action Notice and State Adverse Action Notice
13. ***Massachusetts*** – State Pre-Adverse Action Notice and State Adverse Action Notice
14. ***New Jersey*** – State Pre-Adverse Action Notice
15. ***Washington (outside Seattle)*** – State Pre-Adverse Action Notice

Ensure you include all enclosures referenced in the letters, including the Federal Summary of Your Rights Under the Fair Credit Reporting Act.

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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **PRE-ADVERSE ACTION NOTICE**

[Date]

Dear [Applicant/Employee],

You authorized us to obtain a consumer report and/or investigative consumer report on you in connection with your application for employment or current employment with us.

As you may recall from the disclosure and/or authorization forms, "consumer reports" are reports from consumer reporting agencies about you and may include driving records, criminal records, credit reports, etc. and "investigative consumer reports" are reports in which information as to character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with neighbors, friends, associates, acquaintances, and/or others.

This letter is to inform you that we are considering making an employment decision about you, based in whole or in part, on information contained in your consumer report. Accordingly, we are providing you with the following enclosed information:

- a) a copy of the report; and
- b) a description, in writing, of your rights under the Federal Fair Credit Reporting Act, as prescribed by the Consumer Financial Protection Bureau.

If you believe the information in the report is incorrect and/or would like to provide any additional information related to your report, please provide us with written notice detailing the inaccuracy or information you would like considered within 5 business days of receipt of this letter. Additionally, if you believe the consumer report is inaccurate, you also have the right to file a dispute with the consumer reporting agency. You may contact them directly at the phone number or email listed below.

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

If an adverse decision affecting your employment occurs based, in whole or in part, on the report, you will receive additional information.

Sincerely,

[Client Name]

[End of Document]

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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **ADVERSE ACTION NOTICE**

[Date]

Dear [Applicant/Employee],

Your recent application for employment has been denied, or your current employment has been terminated, based in whole or in part, on information contained in a consumer report. The consumer reporting agency providing this report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

The above-named consumer reporting agency did not make the decision to take the adverse employment action and is unable to provide you the specific reasons why the action was taken.

You have the right, upon providing proper identification, to obtain an additional free copy of your consumer report from the above-named consumer reporting agency. You have sixty (60) days from the date you receive this notice to request a free copy of your consumer report.

You also have the right to dispute with the above-named consumer reporting agency, the accuracy or completeness of any information contained in your consumer report. You may contact them directly at the phone number or email listed above.

Thank you for your interest in working for our company.

Sincerely,

[Client Name]

**[End of Document]**

Sample documents are provided for educational purposes ONLY and should NOT be construed as legal advice, guidance, or counsel. Clients should consult their own attorney(s) about their compliance responsibilities under the Fair Credit Reporting Act as well as under other federal, state, and local laws and should consult with their own attorney(s) before using any sample. TEAM Background expressly disclaims any warranties, responsibility, or damages associated with or arising out of information or samples provided. For clients seeking credit reports or information, additional notices may be necessary.

[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **LOCAL PRE-ADVERSE ACTION NOTICE**

**GAINESVILLE, FLORIDA**

[Date]

Dear [Applicant/Employee],

You authorized us to obtain a consumer report and/or investigative consumer report on you in connection with your application for employment or current employment with us. A conditional offer of employment was extended to you on [Date]. This offer of employment was conditioned on a review of your consumer report.

As you may recall, "consumer reports" are reports from consumer reporting agencies and may include driving records, criminal records, credit reports, etc. and "investigative consumer reports" are reports in which information as to character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with neighbors, friends, associates, acquaintances, or others.

The consumer report we ran on you reported that you have criminal conviction(s) as follows:

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This letter is to inform you that we are considering making an employment decision about you (withdrawing our conditional offer of employment), based in whole or in part, on your consumer report and/or investigative consumer report. We are conducting an individualized assessment of whether there is a direct relationship between your criminal history and the position you are being considered for. Accordingly, we are providing you with the following information:

- a) A copy of the report. The consumer reporting agency providing the report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

- b) a description, in writing, of your rights under the Federal Fair Credit Reporting Act, as prescribed by the Consumer Financial Protection Bureau.

You have the right to respond to this notice by providing documents or information challenging the accuracy or completeness of the report. Likewise, we invite you to provide us with: (i) any information demonstrating your rehabilitation and good conduct, since the occurrence of the offense(s); and/or (ii) any other information you believe relevant to the criminal history in your report and our assessment of your suitability for the job.

If you have documents or information you wish to submit, you must do so immediately, no later than five (5) business days of your receipt of this letter.

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Additionally, if you believe the consumer report is inaccurate, you also have the right to file a dispute with the consumer reporting agency. You may contact them directly at the phone number or email listed above.

Sincerely,

[Client Name]

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## INDIVIDUALIZED ASSESSMENT AND REASSESSMENT FORM

**GAINESVILLE, FLORIDA**

### INFORMATION

Employer Name:

Applicant Name:

Position Applied For:

Date of Conditional Offer:

Date of Criminal History Report:

Individual Assessment Performed by:

Date of Assessment:

**Consistent with applicable law, the following factors are considered before making our determination:**

The conviction(s) that we considered as the basis for our preliminary decision are:

The length of time since the conviction(s) occurred: \_\_\_\_\_ years \_\_\_\_\_ months

The number of convictions appearing on your record: \_\_\_\_\_

The nature and severity of the conviction and its relationship to the safety and security of others:

The facts or circumstances surrounding the conviction are:

Your age when your conviction occurred: \_\_\_\_\_ years old

Evidence of rehabilitation and good conduct, which is listed below:

*If you have additional documents we should consider, please send them, including but not limited to evidence that you attended school or job training.*

**Based on the factors above, we are considering rescinding our offer of employment because:**

The specific duties and responsibilities of the job, which are:

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We believe your record impacts your fitness or ability to perform these duties and responsibilities because (e.g., the employment position offers the opportunity for the same or a similar offense to occur; circumstances leading to the conduct for which you were convicted will recur in the position; or there is unreasonable risk to persons or property):



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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **STATE ADVERSE ACTION NOTICE**

**GAINESVILLE, FLORIDA**

[Date]

Dear [Applicant/Employee],

This letter is to inform you that your recent application for employment has been denied, or your current employment has been terminated, based in whole or in part, on information contained in your consumer report and/or investigative consumer report, including criminal history information included in the report.

In making our determination, we considered any information you provided challenging the accuracy of the report, evidence of your rehabilitation and good conduct since the occurrence of the offense, and any other information you provided.

The report was prepared pursuant to your authorization. You also received a copy of your consumer report, a Summary of Your Rights Under the Fair Credit Reporting Act, and any other legally required notices for your location. The consumer report was used only for employment purposes and provided by the following agency:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

The above-named agency did not make the decision to take the adverse employment action and is unable to provide you the specific reasons why the action was taken.

You have the right to obtain an additional free copy of your report from the above-named agency, or any national consumer reporting agency. You have sixty (60) days from the date you receive this notice to request a free copy of your report.

You also have the right to dispute with the above-named consumer reporting agency, the accuracy or completeness of any information contained in your consumer report. You may contact them directly at the phone number or email listed above.

**This notice is provided in accordance with the City of Gainesville Code of Ordinances, Chapter 14.5, Section 14.5-181, which regulates the process and timing of criminal background checks conducted on applicants.**

Thank you for your interest in working for our company.

Sincerely,

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**[Client Name]**

**[End of Document]**

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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **LOCAL PRE-ADVERSE ACTION NOTICE**

**LOS ANGELES, CALIFORNIA**

[Date]

Dear [Applicant/Employee],

As you know, you authorized us to obtain a consumer report and/or investigative consumer report on you in connection with your consideration for employment. A conditional offer of employment was extended to you on [Date]. This offer of employment was conditioned on a review of your consumer report.

As you may recall, from the disclosure and/or authorization forms, "consumer reports" are reports from consumer reporting agencies and may include driving records, criminal records, credit reports, etc., and "investigative consumer reports" are a type of consumer report which may include information as to character, general reputation, personal characteristics, or mode of living and may include information obtained through personal interviews with neighbors, friends, associates, acquaintances, or others.

The consumer report we ran on you reported that you have criminal conviction(s) as follows:

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This letter is to inform you that we are considering withdrawing our conditional offer of employment, based in whole or in part, on your consumer report and/or investigative consumer report. We are conducting an individualized assessment of whether your conviction history has a direct and adverse relationship with the duties of the job you were offered. Accordingly, we are providing you with the following information:

- a) A copy of the report. The consumer reporting agency providing the report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

- b) a description, in writing, of your rights under the Federal Fair Credit Reporting Act, as prescribed by the Consumer Financial Protection Bureau.  
c) a copy, in writing, of our individualized assessment.

**You have the right to respond to this notice by providing documents or information challenging the accuracy or completeness of the report. Likewise, we invite you to provide us with (i) any evidence of your rehabilitation and/or mitigating circumstances, and/or (ii) any other information relevant to the factors being considered in our individualized assessment.**

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If you have documents or information you wish to submit, you must do so immediately, no later than five (5) business days from your receipt of this letter. If you notify us, in writing, within five (5) business days of receipt of this letter, that you wish to challenge the accuracy of your report and/or that you are taking specific steps to obtain evidence supporting your challenge, we will provide you with an additional five (5) business days to submit your challenge.

Additionally, if you believe the consumer report is inaccurate, you also have the right to file a dispute with the consumer reporting agency. You may contact them directly at the phone number or email listed above.

Sincerely,

[Client Name]

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## INDIVIDUALIZED ASSESSMENT AND REASSESSMENT FORM

### LOS ANGELES, CALIFORNIA

#### INFORMATION

Employer Name:

Applicant Name:

Position Applied For:

Date of Conditional Offer:

Date of Criminal History Report:

Individual Assessment Performed by:

Date of Assessment:

Date of Reassessment (if applicable):

**The following factors are considered before making our determination:**

The primary duties and responsibilities of the job, which are:

- a) \_\_\_\_\_
- b) \_\_\_\_\_
- c) \_\_\_\_\_
- d) \_\_\_\_\_

Description of the criminal conduct and why the conduct is of concern:

How long ago did the criminal activity occur:

Age at the time of last criminal activity:

Activities since criminal activity, such as work experience, job training, etc.:

- a) \_\_\_\_\_
- b) \_\_\_\_\_
- c) \_\_\_\_\_
- d) \_\_\_\_\_

**Based on the factors above, we are considering rescinding our offer of employment because:**

Describe how there is a link between the specific aspects of the Applicant's Criminal History with risks inherent to the duties of the employment position.

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**To be completed for Reassessment (if applicable):**

Was there an error made in the Criminal History Report? (If so, what information did the Applicant provide to show an error was made?)

Evidence of rehabilitation and good conduct, which is:

- a) \_\_\_\_\_
- b) \_\_\_\_\_
- c) \_\_\_\_\_
- d) \_\_\_\_\_

Evidence includes documents that the Applicant attended school, religious institution, job training or counseling; or is involved with the community. Candidates can include letters from people who know them, like teachers, counselors, supervisors, clergy, and parole or probation officers.

Based on the evidence provided, we are [rescinding][not rescinding] (circle one) our offer of employment, because:

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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **LOCAL ADVERSE ACTION NOTICE**

**LOS ANGELES, CALIFORNIA**

[Date]

Dear [Applicant/Employee],

This letter is to inform you that your recent application for employment has been denied, or your current employment has been terminated, based in whole or in part, on information contained in your consumer report and/or investigative consumer report.

In making our determination, we considered any information you provided, challenging the accuracy of your criminal conviction history, evidence of your rehabilitation or mitigating circumstances. A copy of our Individualized Assessment and Re-Assessment Form is attached.

We do not offer a right to appeal. However, you have the right to file a complaint with the California Department of Fair Employment and Housing.

The report was prepared pursuant to your authorization. We also provided you with a copy of your consumer report, a Summary of Your Rights Under the Fair Credit Reporting Act, and to the extent applicable, other legally required notices for your location. The consumer report was used only for employment purposes and provided by the following agency:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

The above-named agency did not make the decision to take the adverse employment action, and is unable to provide you the specific reasons why the action was taken.

You have the right, pursuant to federal and California law, to obtain an additional free copy of your report from the above-named agency, or any national consumer reporting agency. You have sixty (60) days from the date you receive this notice to request a free copy of your report.

You also have the right to dispute with the above-named consumer reporting agency, the accuracy or completeness of any information contained in your consumer report. You may contact them directly at the phone number or email listed above.

Thank you for your interest in working for our company.

Sincerely,

[Client Name]

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## INDIVIDUALIZED ASSESSMENT AND REASSESSMENT FORM

### LOS ANGELES, CALIFORNIA

| INFORMATION                                                                                                                                                                                              |                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| Employer Name:                                                                                                                                                                                           | Applicant Name:                       |
| Position Applied For:                                                                                                                                                                                    | Date of Conditional Offer:            |
| Date of Criminal History Report:                                                                                                                                                                         | Individual Assessment Performed by:   |
| Date of Assessment:                                                                                                                                                                                      | Date of Reassessment (if applicable): |
| <b>The following factors are considered before making our determination:</b>                                                                                                                             |                                       |
| <p>The primary duties and responsibilities of the job, which are:</p> <ul style="list-style-type: none"> <li>a) _____</li> <li>b) _____</li> <li>c) _____</li> <li>d) _____</li> </ul>                   |                                       |
| Description of the criminal conduct and why the conduct is of concern:                                                                                                                                   |                                       |
| How long ago did the criminal activity occur:                                                                                                                                                            |                                       |
| Age at the time of last criminal activity:                                                                                                                                                               |                                       |
| <p>Activities since criminal activity, such as work experience, job training, etc.:</p> <ul style="list-style-type: none"> <li>a) _____</li> <li>b) _____</li> <li>c) _____</li> <li>d) _____</li> </ul> |                                       |
| <b>Based on the factors above, we are considering rescinding our offer of employment because:</b>                                                                                                        |                                       |
| Describe how there is a link between the specific aspects of the applicant's criminal history with risks inherent to the duties of the employment position.                                              |                                       |

| To be completed for Reassessment (if applicable):                                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Was there an error made in the criminal history report? (If so, what information did the applicant provide to show an error was made?)                                                                                                                                                            |
| Evidence of rehabilitation and good conduct, which is:                                                                                                                                                                                                                                            |
| <ul style="list-style-type: none"> <li>a) _____</li> <li>b) _____</li> <li>c) _____</li> <li>d) _____</li> </ul>                                                                                                                                                                                  |
| Evidence includes documents that the applicant attended school, religious institution, job training or counseling; or is involved with the community. Candidates can include letters from people who know them, like teachers, counselors, supervisors, clergy, and parole or probation officers. |



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Based on the evidence provided, we are [rescinding][not rescinding] (circle one) our offer of employment, because:

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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **LOCAL PRE-ADVERSE ACTION NOTICE**

**MONTGOMERY COUNTY, MARYLAND AND PRINCE GEORGE'S COUNTY MARYLAND**

[Date]

Dear [Applicant/Employee],

You authorized us to obtain a consumer report and/or investigative consumer report on you in connection with your application for employment or current employment with us. A conditional offer of employment was extended to you on [Date]. This offer of employment was conditioned on a review of your criminal history.

As you may recall, "consumer reports" are reports from consumer reporting agencies and may include driving records, criminal records, credit reports, etc., and "investigative consumer reports" are reports in which information as to character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with neighbors, friends, associates, acquaintances, or others.

The consumer report we ran on you reported that you have criminal conviction(s) as follows:

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---

---

This letter is to inform you that we are considering withdrawing our conditional offer of employment, based in whole or in part, on your consumer report and/or investigative consumer report. We are conducting an individualized assessment of whether your conviction history has a direct and adverse relationship with the specific duties of the job you were offered. Accordingly, we are providing you with the following information:

- a) A copy of the report. The consumer reporting agency providing the report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

- b) a description, in writing, of your rights under the Federal Fair Credit Reporting Act, as prescribed by the Consumer Financial Protection Bureau.

You have the right to respond to this notice by providing documents or information challenging the accuracy or completeness of the report.

If you believe any item(s) on your report are inaccurate or have any information you wish to submit related to or explaining information in your report, you must do so immediately, no later than seven (7) days from your receipt of this letter.

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Additionally, if you believe the consumer report is inaccurate, you also have the right to file a dispute with the consumer reporting agency. You may contact them directly at the phone number or email listed above.

Sincerely,

[Client Name]

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## INDIVIDUALIZED ASSESSMENT AND REASSESSMENT FORM

### MONTGOMERY COUNTY, MARYLAND AND PRINCE GEORGE'S COUNTY MARYLAND

| INFORMATION                                                                                                                                                   |                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Employer Name:                                                                                                                                                | Applicant Name:                     |
| Position Applied For:                                                                                                                                         | Date of Conditional Offer:          |
| Date of Criminal History Report:                                                                                                                              | Individual Assessment Performed by: |
| Date of Assessment:                                                                                                                                           |                                     |
| <b>Consistent with applicable law, the following factors are considered before making our determination:</b>                                                  |                                     |
| The conviction(s) that we considered as the basis for our preliminary decision are:                                                                           |                                     |
|                                                                                                                                                               |                                     |
| The length of time since the conviction(s) occurred: _____ years _____ months                                                                                 |                                     |
| The number of convictions appearing on your record: _____                                                                                                     |                                     |
| The nature and severity of the conviction and its relationship to the safety and security of others:                                                          |                                     |
|                                                                                                                                                               |                                     |
| The facts or circumstances surrounding the conviction are:                                                                                                    |                                     |
|                                                                                                                                                               |                                     |
| Your age when your conviction occurred: _____ years old                                                                                                       |                                     |
| Evidence of rehabilitation and good conduct, which is listed below:                                                                                           |                                     |
|                                                                                                                                                               |                                     |
| <i>If you have additional documents we should consider, please send them, including but not limited to evidence that you attended school or job training.</i> |                                     |
| <b>Based on the factors above, we are considering rescinding our offer of employment because:</b>                                                             |                                     |
| The specific duties and responsibilities of the job, which are:                                                                                               |                                     |
|                                                                                                                                                               |                                     |

*Sample documents are provided for educational purposes ONLY and should NOT be construed as legal advice, guidance, or counsel. Clients should consult their own attorney(s) about their compliance responsibilities under the Fair Credit Reporting Act as well as under other federal, state, and local laws and should consult with their own attorney(s) before using any sample. TEAM Background expressly disclaims any warranties, responsibility, or damages associated with or arising out of information or samples provided. For clients seeking credit reports or information, additional notices may be necessary.*

We believe your record impacts your fitness or ability to perform these duties and responsibilities because (e.g., the employment position offers the opportunity for the same or a similar offense to occur; circumstances leading to the conduct for which you were convicted will recur in the position; or there is unreasonable risk to persons or property):

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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **LOCAL PRE-ADVERSE ACTION NOTICE**

**NEW YORK CITY**

[Date]

Dear [Applicant/Employee],

You authorized us to obtain a consumer report and/or investigative consumer report on you in connection with your application for employment or current employment with us. A conditional offer of employment was extended to you on [Date]. This offer of employment was conditioned on a review of your consumer report.

As you may recall, "consumer reports" are reports from consumer reporting agencies and may include driving records, criminal records, credit reports, etc., and "investigative consumer reports" are reports in which information as to character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with neighbors, friends, associates, acquaintances, or others.

This letter is to inform you that we are considering making an employment decision about you (withdrawing our conditional offer of employment), based in whole or in part, on your consumer report and/or investigative consumer report. We are conducting an individualized assessment of whether there is a direct relationship between your criminal history and the position you are being considered, including whether it would result in an unreasonable risk to property, or the safety or welfare of others. Accordingly, we are providing you with the following information:

- a) A copy of the report. The consumer reporting agency providing the report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

- b) a description, in writing, of your rights under the Federal Fair Credit Reporting Act, as prescribed by the Consumer Financial Protection Bureau; and  
c) a copy, in writing, of our individualized assessment.

**You have the right to respond to this notice by providing documents or information challenging the accuracy or completeness of the report. Likewise, we invite you to provide us with: (i) any evidence of your rehabilitation or good conduct; and/or (ii) any other information relevant to the factors being considered in our individualized assessment.**

If you have documents or information you wish to submit, you must do so immediately, no later than five (5) business days of your receipt of this letter.

Additionally, if you believe the consumer report is inaccurate, you also have the right to file a dispute with the consumer reporting agency. You may contact them directly at the phone number or email listed above.

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Sincerely,

[Client Name]

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## INDIVIDUALIZED ASSESSMENT AND REASSESSMENT FORM

### NEW YORK CITY

|                                                                                                                                                                                                                                                                                                                                                            |                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Employer Name:                                                                                                                                                                                                                                                                                                                                             | Applicant Name:                     |
| Position Applied For:                                                                                                                                                                                                                                                                                                                                      | Date of Conditional Offer:          |
| Date of Criminal History Report:                                                                                                                                                                                                                                                                                                                           | Individual Assessment Performed by: |
| Date of Assessment:                                                                                                                                                                                                                                                                                                                                        |                                     |
| <b>Consistent with applicable law, the following factors are considered before making our determination:</b>                                                                                                                                                                                                                                               |                                     |
| The government encourages employers to hire people with criminal records.                                                                                                                                                                                                                                                                                  |                                     |
| The specific duties and responsibilities of the job, which are:<br>1. _____<br>2. _____<br>3. _____<br>4. _____                                                                                                                                                                                                                                            |                                     |
| We believe your record impacts your fitness or ability to perform these duties and responsibilities because:                                                                                                                                                                                                                                               |                                     |
| [To be completed only with respect to convictions, not pending cases.]                                                                                                                                                                                                                                                                                     |                                     |
| How long ago your criminal activity, not your conviction, occurred: _____ years _____ months                                                                                                                                                                                                                                                               |                                     |
| Your age when your alleged/conviction criminal activity (not your arrest or conviction) occurred: _____ years old                                                                                                                                                                                                                                          |                                     |
| If you were 25 or younger, we consider this a mitigating factor.                                                                                                                                                                                                                                                                                           |                                     |
| The seriousness of the conduct that led to your criminal record, which is:                                                                                                                                                                                                                                                                                 |                                     |
| Your evidence of rehabilitation and good conduct, which is listed below:                                                                                                                                                                                                                                                                                   |                                     |
| 1. _____<br>2. _____<br>3. _____                                                                                                                                                                                                                                                                                                                           |                                     |
| <i>If you have additional documents we should consider, please send them, including but not limited to evidence that you attended school, job training, or counseling; or are involved with your community. Candidates can include letters from people who know you, like teachers, counselors, supervisors, clergy, and parole or probation officers.</i> |                                     |
| Our legitimate interest in protecting property, and the safety and welfare of specific individuals or the general public, which is:                                                                                                                                                                                                                        |                                     |
| Your certificate(s) of relief or certificate of good conduct shows that you are rehabilitated. If you did not have a certificate, we did not hold that against you.                                                                                                                                                                                        |                                     |
| [Assessment Page 1 of 2]                                                                                                                                                                                                                                                                                                                                   |                                     |



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**Based on the factors above, we are considering rescinding our offer of employment because (choose one or both below):**

We believe there is a direct relationship between your criminal record and the job we offered to you, and the factors listed above do not lessen that relationship because:

Your criminal record creates an unreasonable risk to specific persons, the general public, or our property because:

[Assessment Page 2 of 2]

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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **LOCAL ADVERSE ACTION NOTICE**

**NEW YORK CITY, NEW YORK**

[Date]

Dear [Applicant/Employee],

This letter is to inform you that your recent application for employment has been denied, or your current employment has been terminated, based in whole or in part, on information contained in your consumer report and/or investigative consumer report.

In making our determination, we considered any information you provided challenging the accuracy of your criminal conviction history, evidence of your rehabilitation and/or mitigating circumstances, or both. A copy of our Individualized Assessment and Re-Assessment Form is attached.

The report was prepared pursuant to your authorization. We also provided you with a copy of your consumer report, a Summary of Your Rights Under the Fair Credit Reporting Act, and to the extent applicable, other legally required notices for your location. The consumer report was used only for employment purposes and provided by the following agency:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

The above-named consumer reporting agency did not make the decision to take the adverse employment action and is unable to provide you the specific reasons why the action was taken.

You have the right, upon providing proper identification, to obtain an additional free copy of your consumer report from the above-named consumer reporting agency. You have sixty (60) days from the date you receive this notice to request a free copy of your consumer report.

You also have the right to dispute with the above-named consumer reporting agency, the accuracy or completeness of any information contained in your consumer report. You may contact them directly at the phone number or email listed above.

Thank you for your interest in working for our company.

Sincerely,

[Client Name]

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## INDIVIDUALIZED ASSESSMENT AND REASSESSMENT FORM

### NEW YORK CITY

|                                                                                                                                                                                                                                                                                                                                                            |                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Employer Name:                                                                                                                                                                                                                                                                                                                                             | Applicant Name:                     |
| Position Applied For:                                                                                                                                                                                                                                                                                                                                      | Date of Conditional Offer:          |
| Date of Criminal History Report:                                                                                                                                                                                                                                                                                                                           | Individual Assessment Performed by: |
| Date of Assessment:                                                                                                                                                                                                                                                                                                                                        |                                     |
| <b>Consistent with applicable law, the following factors are considered before making our determination:</b>                                                                                                                                                                                                                                               |                                     |
| The government encourages employers to hire people with criminal records.                                                                                                                                                                                                                                                                                  |                                     |
| The specific duties and responsibilities of the job, which are:<br>1. _____<br>2. _____<br>3. _____<br>4. _____                                                                                                                                                                                                                                            |                                     |
| We believe your record impacts your fitness or ability to perform these duties and responsibilities because:                                                                                                                                                                                                                                               |                                     |
| [To be completed only with respect to convictions, not pending cases.]                                                                                                                                                                                                                                                                                     |                                     |
| How long ago your criminal activity, not your conviction, occurred: _____ years _____ months                                                                                                                                                                                                                                                               |                                     |
| Your age when your alleged/conviction criminal activity (not your arrest or conviction) occurred: _____ years old                                                                                                                                                                                                                                          |                                     |
| If you were 25 or younger, we consider this a mitigating factor.                                                                                                                                                                                                                                                                                           |                                     |
| The seriousness of the conduct that led to your criminal record, which is:                                                                                                                                                                                                                                                                                 |                                     |
| Your evidence of rehabilitation and good conduct, which is listed below:                                                                                                                                                                                                                                                                                   |                                     |
| 1. _____<br>2. _____<br>3. _____                                                                                                                                                                                                                                                                                                                           |                                     |
| <i>If you have additional documents we should consider, please send them, including but not limited to evidence that you attended school, job training, or counseling; or are involved with your community. Candidates can include letters from people who know you, like teachers, counselors, supervisors, clergy, and parole or probation officers.</i> |                                     |
| Our legitimate interest in protecting property, and the safety and welfare of specific individuals or the general public, which is:                                                                                                                                                                                                                        |                                     |
| Your certificate(s) of relief or certificate of good conduct shows that you are rehabilitated. If you did not have a certificate, we did not hold that against you.                                                                                                                                                                                        |                                     |
| [Assessment Page 1 of 2]                                                                                                                                                                                                                                                                                                                                   |                                     |

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**Based on the factors above, we are considering rescinding our offer of employment because (choose one or both below):**

We believe there is a direct relationship between your criminal record and the job we offered to you, and the factors listed above do not lessen that relationship because:

Your criminal record creates an unreasonable risk to specific persons, the general public, or our property because:

[Assessment Page 2 of 2]

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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **LOCAL PRE-ADVERSE ACTION NOTICE**

**PHILADELPHIA, PENNSYLVANIA**

[Date]

Dear [Applicant/Employee],

You authorized us to obtain a consumer report and/or investigative consumer report on you in connection with your application for employment or current employment with us. A conditional offer of employment was extended to you on [Date]. This offer of employment was conditioned on a review of your consumer report.

As you may recall, "consumer reports" are reports from consumer reporting agencies and may include driving records, criminal records, credit reports, etc., and "investigative consumer reports" are reports in which information as to character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with neighbors, friends, associates, acquaintances, or others.

The consumer report we ran on you reported that you have criminal conviction(s) as follows:

---

---

---

This letter is to inform you that we are considering making an employment decision about you (withdrawing our conditional offer of employment), based in whole or in part, on your consumer report and/or investigative consumer report. We are conducting an individualized assessment on whether your conviction history has a direct and adverse relationship with the specific duties of the job you were offered and/or whether you would present an unacceptable risk to business operations or others. Accordingly, we are providing you with the following information:

- a) A copy of the report. The consumer reporting agency providing the report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

- b) a description, in writing, of your rights under the Federal Fair Credit Reporting Act, as prescribed by the Consumer Financial Protection Bureau.

You have the right to respond to this letter by providing documents or information challenging the accuracy or completeness of the report. Likewise, we invite you to provide us with: (i) any evidence of your rehabilitation or mitigating circumstances, including but not limited to evidence of employment history, character or employment references; and/or (ii) any other information relevant to the information in the report or job for which you are being considered.

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If you have any documents or information you wish to submit, you must do so immediately, no later than ten (10) business days from your receipt of this letter.

Additionally, if you believe the consumer report is inaccurate, you also have the right to file a dispute with the consumer reporting agency. You may contact them directly at the phone number or email listed above.

Sincerely,

[Client Name]

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## INDIVIDUALIZED ASSESSMENT AND REASSESSMENT FORM

### PHILADELPHIA, PENNSYLVANIA

| INFORMATION                                                                                                                                                   |                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Employer Name:                                                                                                                                                | Applicant Name:                     |
| Position Applied For:                                                                                                                                         | Date of Conditional Offer:          |
| Date of Criminal History Report:                                                                                                                              | Individual Assessment Performed by: |
| Date of Assessment:                                                                                                                                           |                                     |
| <b>Consistent with applicable law, the following factors are considered before making our determination:</b>                                                  |                                     |
| The conviction(s) that we considered as the basis for our preliminary decision are:                                                                           |                                     |
|                                                                                                                                                               |                                     |
| The length of time since the conviction(s) occurred: _____ years _____ months                                                                                 |                                     |
| The number of convictions appearing on your record: _____                                                                                                     |                                     |
| The nature and severity of the conviction and its relationship to the safety and security of others:                                                          |                                     |
|                                                                                                                                                               |                                     |
| The facts or circumstances surrounding the conviction are:                                                                                                    |                                     |
|                                                                                                                                                               |                                     |
| Your age when your conviction occurred: _____ years old                                                                                                       |                                     |
| Evidence of rehabilitation and good conduct, which is listed below:                                                                                           |                                     |
|                                                                                                                                                               |                                     |
| <i>If you have additional documents we should consider, please send them, including but not limited to evidence that you attended school or job training.</i> |                                     |
| <b>Based on the factors above, we are considering rescinding our offer of employment because:</b>                                                             |                                     |
| The specific duties and responsibilities of the job, which are:                                                                                               |                                     |
|                                                                                                                                                               |                                     |

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We believe your record impacts your fitness or ability to perform these duties and responsibilities because (e.g., the employment position offers the opportunity for the same or a similar offense to occur; circumstances leading to the conduct for which you were convicted will recur in the position; or there is unreasonable risk to persons or property):



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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **LOCAL PRE-ADVERSE ACTION NOTICE**

**PORTLAND, OREGON**

[Date]

Dear [Applicant/Employee],

As you know, you authorized us to obtain a consumer report and/or investigative consumer report on you in connection with your employment with us. A conditional offer of employment was extended to you on [Date]. This offer of employment was conditioned on a review of your consumer report.

As you may recall, "consumer reports" are reports from consumer reporting agencies and may include driving records, criminal records, credit reports, etc., and "investigative consumer reports" are reports in which information as to character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with neighbors, friends, associates, acquaintances, or others.

The consumer report we ran on you reported that you have criminal conviction(s) as follows:

---

---

---

This letter is to inform you that we are considering making an employment decision about you (withdrawing our conditional offer of employment), based in whole or in part, on your consumer report and/or investigative consumer report. We are conducting an individualized assessment of whether your conviction history has a direct and adverse relationship with the specific duties of the job you were offered (including, consideration of the nature of the offense(s), the time elapsed since the offense(s), and the nature of the specific job held or sought). Accordingly, we are providing you with the following information:

- a) A copy of the report. The consumer reporting agency providing the report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

- b) a description, in writing, of your rights under the Federal Fair Credit Reporting Act, as prescribed by the Consumer Financial Protection Bureau.

If you have any questions regarding this report or believe the information in the report is incorrect, please provide us with any relevant information and/or written documentation IMMEDIATELY, no later than five (5) days your receipt of this letter.

Additionally, if you believe the consumer report is inaccurate, you also have the right to file a dispute with the consumer reporting agency. You may contact them directly at the phone number or email listed above.

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Sincerely,

[Client Name]

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## INDIVIDUALIZED ASSESSMENT AND REASSESSMENT FORM

PORTLAND, OREGON

| INFORMATION                                                                                                                                                   |                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Employer Name:                                                                                                                                                | Applicant Name:                     |
| Position Applied For:                                                                                                                                         | Date of Conditional Offer:          |
| Date of Criminal History Report:                                                                                                                              | Individual Assessment Performed by: |
| Date of Assessment:                                                                                                                                           |                                     |
| <b>Consistent with applicable law, the following factors are considered before making our determination:</b>                                                  |                                     |
| The conviction(s) that we considered as the basis for our preliminary decision are:                                                                           |                                     |
| The length of time since the conviction(s) occurred: _____ years _____ months                                                                                 |                                     |
| The number of convictions appearing on your record: _____                                                                                                     |                                     |
| The nature and severity of the conviction and its relationship to the safety and security of others:                                                          |                                     |
| The facts or circumstances surrounding the conviction are:                                                                                                    |                                     |
| Your age when your conviction occurred: _____ years old                                                                                                       |                                     |
| Evidence of rehabilitation and good conduct, which is listed below:                                                                                           |                                     |
| <i>If you have additional documents we should consider, please send them, including but not limited to evidence that you attended school or job training.</i> |                                     |
| <b>Based on the factors above, we are considering rescinding our offer of employment because:</b>                                                             |                                     |
| The specific duties and responsibilities of the job, which are:                                                                                               |                                     |

*Sample documents are provided for educational purposes ONLY and should NOT be construed as legal advice, guidance, or counsel. Clients should consult their own attorney(s) about their compliance responsibilities under the Fair Credit Reporting Act as well as under other federal, state, and local laws and should consult with their own attorney(s) before using any sample. TEAM Background expressly disclaims any warranties, responsibility, or damages associated with or arising out of information or samples provided. For clients seeking credit reports or information, additional notices may be necessary.*

We believe your record impacts your fitness or ability to perform these duties and responsibilities because (e.g., the employment position offers the opportunity for the same or a similar offense to occur; circumstances leading to the conduct for which you were convicted will recur in the position; or there is unreasonable risk to persons or property):

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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **LOCAL PRE-ADVERSE ACTION NOTICE**

**SAN FRANCISCO, CALIFORNIA**

[Date]

Dear [Applicant/Employee],

As you know, you authorized us to obtain a consumer report and/or investigative consumer report on you in connection with your consideration for employment with us. A conditional offer of employment was extended to you on [Date]. This offer of employment was conditioned on a review of your consumer report.

As you may recall, from the disclosure and/or authorization forms, "consumer reports" are reports from consumer reporting agencies and may include driving records, criminal records, credit reports, etc. and "investigative consumer reports" are a type of consumer report which may include information as to character, general reputation, personal characteristics, or mode of living and may include information obtained through personal interviews with neighbors, friends, associates, acquaintances, or others.

The consumer report we ran on you reported that you have criminal conviction(s) as follows:

---

---

---

This letter is to inform you that we are considering withdrawing our conditional offer of employment, based in whole or in part, on your consumer report and/or investigative consumer report. We are conducting an individualized assessment of whether your conviction history has a direct and adverse relationship with the specific duties of the job you were offered. Accordingly, we are providing you with the following information:

- a) A copy of the report. The consumer reporting agency providing the report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

- b) a description, in writing, of your rights under the Federal Fair Credit Reporting Act, as prescribed by the Consumer Financial Protection Bureau.

You have the right to respond to this notice by providing: (i) documents or information challenging the accuracy or completeness of the report, (ii) evidence of your rehabilitation and/or mitigating circumstances, or (iii) both.

If you have documents or information you wish to submit, you must do so immediately, no later than seven (7) days from your receipt of this letter. If you notify us, orally or in writing, within seven (7) days of your receipt of this letter that you wish to challenge the accuracy of the report that was provided to us and/or that you are

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taking specific steps to obtain evidence supporting your challenge, we will provide you with an additional five (5) business days in which to submit your challenge.

Additionally, if you believe the consumer report is inaccurate, you also have the right to file a dispute with the consumer reporting agency. You may contact them directly at the phone number or email listed above.

Sincerely,

[Client Name]

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## INDIVIDUALIZED ASSESSMENT AND REASSESSMENT FORM

**SAN FRANCISCO, CALIFORNIA**

| INFORMATION                                                                                                                                                   |                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Employer Name:                                                                                                                                                | Applicant Name:                     |
| Position Applied For:                                                                                                                                         | Date of Conditional Offer:          |
| Date of Criminal History Report:                                                                                                                              | Individual Assessment Performed by: |
| Date of Assessment:                                                                                                                                           |                                     |
| <b>Consistent with applicable law, the following factors are considered before making our determination:</b>                                                  |                                     |
| The conviction(s) that we considered as the basis for our preliminary decision are:                                                                           |                                     |
| The length of time since the conviction(s) occurred: _____ years _____ months                                                                                 |                                     |
| The number of convictions appearing on your record: _____                                                                                                     |                                     |
| The nature and severity of the conviction and its relationship to the safety and security of others:                                                          |                                     |
| The facts or circumstances surrounding the conviction are:                                                                                                    |                                     |
| Your age when your conviction occurred: _____ years old                                                                                                       |                                     |
| Evidence of rehabilitation and good conduct, which is listed below:                                                                                           |                                     |
| <i>If you have additional documents we should consider, please send them, including but not limited to evidence that you attended school or job training.</i> |                                     |
| <b>Based on the factors above, we are considering rescinding our offer of employment because:</b>                                                             |                                     |
| The specific duties and responsibilities of the job, which are:                                                                                               |                                     |

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We believe your record impacts your fitness or ability to perform these duties and responsibilities because (e.g., the employment position offers the opportunity for the same or a similar offense to occur; circumstances leading to the conduct for which you were convicted will recur in the position; or there is unreasonable risk to persons or property):



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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **LOCAL PRE-ADVERSE ACTION NOTICE**

**SEATTLE, WASHINGTON**

[Date]

Dear [Applicant/Employee],

You authorized us to obtain a consumer report and/or investigative consumer report on you in connection with your employment. A conditional offer of employment was extended to you on [Date]. This offer of employment was conditioned on a review of your consumer report.

As you may recall, "consumer reports" are reports from consumer reporting agencies and may include driving records, criminal records, credit reports, etc., and "investigative consumer reports" are reports in which information as to character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with neighbors, friends, associates, acquaintances, or others.

The consumer report we ran on you reported that you have criminal conviction(s) as follows:

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This letter is to inform you that we are considering making an employment decision about you (withdrawing our conditional offer of employment), based in whole or in part, on your consumer report or investigative consumer report. We are conducting an individualized assessment of whether your criminal conduct: (1) has a negative impact on your fitness or ability to perform the position sought or held, or (2) will harm or cause injury to people, property, business reputation, or business assets. Accordingly, we are providing you with the following information:

- a) A copy of the report. The consumer reporting agency providing the report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

- b) a description, in writing, of your rights under the Federal Fair Credit Reporting Act, as prescribed by the Consumer Financial Protection Bureau.  
c) A description of your rights under the Washington Fair Credit Reporting Act.

You have the right to respond to this letter by providing documents or information challenging the accuracy or completeness of the report. Likewise, we invite you to provide us with: (i) information regarding the conduct underlying the criminal record; (ii) any evidence of your rehabilitation or good conduct; and/or (iii) any other information relevant to the information in the report or job for which you are being considered. If you have

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documents or information you wish to submit, you must do so IMMEDIATELY, no later than five (5) days your receipt of this letter.

Additionally, if you believe the consumer report is inaccurate, you also have the right to file a dispute with the consumer reporting agency. You may contact them directly at the phone number or email listed above.

Sincerely,

[Client Name]

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## **STATE OF WASHINGTON** **CONSUMER CREDIT REPORTING ACT** **SUMMARY OF CONSUMER RIGHTS**

The State of Washington Fair Credit Reporting Act (WFCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records).

Here is a summary of your major rights under the WFCRA. The WFCRA is modeled after the Federal Fair Credit Reporting Act. The same rights are provided under the Federal Fair Credit Reporting Act and you have received A Summary of Your Rights Under the Federal Fair Credit Reporting Act. You can get the complete text of WFCRA RCW 19.182, from the Washington Code Revisers Office, P.O. Box 40551, Olympia, WA, 98504, or online at <http://apps.leg.wa.gov/rcw/default.aspx?cite=19.182&full=true#19.182.070>.

- ☐ Under Washington law, we must convey your dispute to the source of the information within five business days after receiving your request for investigation. If we determine that the request is frivolous or irrelevant as defined by the Fair Credit Reporting Act, we will notify you within five business days of the reasons for our decision. The results of our investigation will be sent to you within five business days after the investigation is complete. If you request, we will provide you with the company name, address and telephone number of any person contacted during the investigation. If you believe that a law regulating consumer credit reporting has been violated, you may file a complaint with the Washington State Attorney General's Office. Contact details are below.
- ☐ **You must be told if information in your file has been used against you.** If a person takes an adverse action against you that is based, in whole or in part, on information contained in a consumer report, that person must tell you, and must give you the name, address, and telephone number of the consumer reporting agency that provided the information.
- ☐ **You have a right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency, although medical information may be withheld and given directly to your medical provider. You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You will not be charged for:
  - ☐ a consumer report if a person has taken adverse action against you because of information in your credit report;
  - ☐ the reinvestigation of information you dispute; or
  - ☐ corrected reports resulting from the deletion of inaccurate or unverifiable information.

In addition, you are entitled to one free consumer report every 12 months, upon request. You may be charged a limited fee for a second or subsequent report requested by you during a 12 month period.

- ☐ **You have a right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and you notify the consumer reporting agency directly of the dispute, the consumer reporting agency will reinvestigate without charge and record the current status of the disputed information before the end of thirty business days, unless your dispute is frivolous.
- ☐ **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Upon completion of the reinvestigation, if the information you disputed is found to be inaccurate or cannot be verified, the consumer reporting agency will delete the information and notify you of the correction. If the reinvestigation does not resolve your dispute, you may file with the consumer reporting

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agency a brief statement setting forth the nature of your dispute. The statement will be placed in your consumer file and in any subsequent report containing the information you disputed.

- ☐ **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than ten years old.
- ☐ **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The WFCRA specifies those with a valid need for access.
- ☐ **You must be notified if reports are provided to employers.** A consumer reporting agency may not give out information about you to employers without your knowledge. A potential employer must make a clear and conspicuous disclosure in writing to you or obtain your consent before obtaining a report. A current employer may not receive a report unless it has given you written notice that consumer reports may be used for employment purposes.
- ☐ **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** You may elect not to receive unsolicited “prescreened” offers for credit and insurance by using the consumer reporting agency’s notification system to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- ☐ **You may place a security freeze on your credit report.** A security freeze prevents your credit file from being shared with potential creditors or insurance companies. You may request a security freeze by contacting MicroBilt Corporation at, Attn: Compliance Department, PO Box 440693, Kennesaw, GA 30160, or call the following number: 888-222-7621, or 800-884-4747 option# 5, or fax: 404-393-9512. We may charge a fee for providing this service.
- ☐ **You may be able to block information resulting from identity theft from appearing on your credit report.** If you are a victim of identity theft, a consumer reporting agency must permanently block misinformation resulting from that theft from appearing on your credit report. You must provide the consumer reporting agency with a copy of a police report as evidence of your claim before it can place the block on your report.
- ☐ **You may seek damages from violators.** If a consumer reporting agency, or in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the WFCRA, you may be able to sue in state or federal court.

## COMPLAINTS

Any complaints by consumers under state law may be directed to:

Office of the Attorney General  
Consumer Protection Division  
800 5th Avenue, Suite 2000  
Seattle, Washington 98104-3188  
Phone: 1-800-551-4636 or (206) 464-6684  
Fax: (206) 389-2801

Statewide Toll-Free TDD: **800 276-9883**

Complaints May Be Made Via U.S. Mail or E-Mail

**Complaints:** <http://www.atg.wa.gov/FileAComplaint.aspx>

(Include your U.S. Mail address with any complaint.)

**Website & Forms:** <http://www.atg.wa.gov/>

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## INDIVIDUALIZED ASSESSMENT AND REASSESSMENT FORM

SEATTLE, WASHINGTON

| INFORMATION                                                                                                                                                   |                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Employer Name:                                                                                                                                                | Applicant Name:                     |
| Position Applied For:                                                                                                                                         | Date of Conditional Offer:          |
| Date of Criminal History Report:                                                                                                                              | Individual Assessment Performed by: |
| Date of Assessment:                                                                                                                                           |                                     |
| <b>Consistent with applicable law, the following factors are considered before making our determination:</b>                                                  |                                     |
| The conviction(s) that we considered as the basis for our preliminary decision are:                                                                           |                                     |
| The length of time since the conviction(s) occurred: _____ years _____ months                                                                                 |                                     |
| The number of convictions appearing on your record: _____                                                                                                     |                                     |
| The nature and severity of the conviction and its relationship to the safety and security of others:                                                          |                                     |
| The facts or circumstances surrounding the conviction are:                                                                                                    |                                     |
| Your age when your conviction occurred: _____ years old                                                                                                       |                                     |
| Evidence of rehabilitation and good conduct, which is listed below:                                                                                           |                                     |
| <i>If you have additional documents we should consider, please send them, including but not limited to evidence that you attended school or job training.</i> |                                     |
| <b>Based on the factors above, we are considering rescinding our offer of employment because:</b>                                                             |                                     |
| The specific duties and responsibilities of the job, which are:                                                                                               |                                     |

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We believe your record impacts your fitness or ability to perform these duties and responsibilities because (e.g., the employment position offers the opportunity for the same or a similar offense to occur; circumstances leading to the conduct for which you were convicted will recur in the position; or there is unreasonable risk to persons or property):

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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **STATE PRE-ADVERSE ACTION NOTICE**

**CALIFORNIA (OUTSIDE LOS ANGELES AND SAN FRANCISCO)**

[Date]

Dear [Applicant/Employee],

You authorized us to obtain a consumer report and/or investigative consumer report on you in connection with your consideration for employment. A conditional offer of employment was extended to you on [Date]. This offer of employer was conditioned on a review of your criminal history and consumer reports.

As you may recall, from the disclosure and/or authorization forms, "consumer reports" are reports from consumer reporting agencies and may include driving records, criminal records, credit reports, etc., and "investigative consumer reports" are a type of consumer report which may include information as to character, general reputation, personal characteristics, or mode of living and may include information obtained through personal interviews with neighbors, friends, associates, acquaintances, or others.

This letter is to inform you that we are considering making an employment decision about you, based in whole or in part, on information contained in your consumer report. Accordingly, we are providing you with the following enclosed information:

- a) A copy of the report. The consumer reporting agency providing the report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

- b) a description, in writing, of your rights under the Federal Fair Credit Reporting Act, as prescribed by the Consumer Financial Protection Bureau.

If you believe the information in the report is incorrect and/or would like to provide any additional information related to your report, please provide us with written notice detailing the inaccuracy or information you would like considered, immediately. Additionally, if you believe the consumer report is inaccurate, you also have the right to file a dispute with the consumer reporting agency.

If an adverse decision affecting your employment occurs based, in whole or in part, on the report, you will receive additional information.

Sincerely,

[Client Name]

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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **STATE ADVERSE ACTION NOTICE**

**CALIFORNIA (OUTSIDE OF LOS-ANGELES)**

[Date]

Dear [Applicant/Employee],

On [date], we notified you of our tentative decision to withdraw our conditional offer of employment based on your criminal history. We further notified you of your right to submit documents or information challenging the accuracy of your criminal conviction history.

You did not respond by the indicated deadline. Therefore, we must notify you that our decision to withdraw our conditional offer of employment is now final.

This decision was based in whole or in part on information contained in a consumer report. The report was prepared pursuant to your authorization. We also provided you with a copy of your consumer report, a Summary of Your Rights Under the Fair Credit Reporting Act, and to the extent applicable, other legally required notices for your location. The consumer reporting agency providing this report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

The above-named agency did not make the decision to take the adverse employment action and is unable to provide you the specific reasons why the action was taken.

You have the right, pursuant to federal and California law, to obtain an additional free copy of your consumer report from the above-named agency, or any national consumer credit reporting agency. You have sixty (60) days from the date you receive this notice to request this free copy of your consumer report.

You also have the right, pursuant to federal and California law, to dispute with the above-named agency the accuracy or completeness of any information contained in your consumer report.

Thank you for your interest in working for our company.

Sincerely,

[Client Name]



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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **STATE PRE-ADVERSE ACTION NOTICE BASED ON CRIMINAL HISTORY**

**CALIFORNIA (OUTSIDE LOS ANGELES AND SAN FRANCISCO)**

[Date]

Dear [Applicant/Employee],

As you know, a conditional offer of employment was extended to you on [date]. This offer of employment was conditioned on a review of your criminal history and consumer report.

You authorized us to obtain a consumer report and/or investigative consumer report on you in connection with your consideration for employment. As you may recall, from the disclosure and/or authorization forms, "consumer reports" are reports from consumer reporting agencies and may include driving records, criminal records, credit reports, etc., and "investigative consumer reports" are a type of consumer report which may include information as to character, general reputation, personal characteristics, or mode of living and may include information obtained through personal interviews with neighbors, friends, associates, acquaintances, or others.

The consumer report we ran on you reported that you have criminal conviction(s) as follows:

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We have tentatively decided to withdraw our conditional offer of employment to you based on the criminal convictions listed above. We have conducted an individualized assessment of whether your conviction history has a direct and adverse relationship with the specific duties of the job you were offered, and we find that it does.

Accordingly, we are providing you with the following information:

- a) A copy of the report. The consumer reporting agency providing the report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

- b) a description, in writing, of your rights under the Federal Fair Credit Reporting Act, as prescribed by the Consumer Financial Protection Bureau.

You have the right to respond to this notice by providing documents or information challenging the accuracy of the conviction history, evidence of your rehabilitation and/or mitigating circumstances, or both. Additionally, if you believe the consumer report is inaccurate, you also have the right to file a dispute with the consumer reporting agency.

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If you have documents or information you wish to submit regarding evidence of your rehabilitation and/or mitigating circumstances, you must do so within five (5) business days of your receipt of this letter. If you notify us in writing within five (5) business days of your receipt of this letter that you wish to challenge the accuracy of your criminal history that was provided to us and/or that you are taking specific steps to obtain evidence supporting your challenge, you will have an additional five (5) business days in which to submit your challenge. [If in San Francisco, an applicant has 7 days from receipt of this letter to provide documents or information to challenge the accuracy of the consumer report.]

Sincerely,

[Client Name]

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## INDIVIDUALIZED ASSESSMENT AND REASSESSMENT FORM

### CALIFORNIA (OUTSIDE LOS ANGELES AND SAN FRANCISCO)

| INFORMATION                                                                                                                                                                                     |                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| Employer Name:                                                                                                                                                                                  | Applicant Name:                       |
| Position Applied For:                                                                                                                                                                           | Date of Conditional Offer:            |
| Date of Criminal History Report:                                                                                                                                                                | Individual Assessment Performed by:   |
| Date of Assessment:                                                                                                                                                                             | Date of Reassessment (if applicable): |
| <b>The following factors were considered before making our determination:</b>                                                                                                                   |                                       |
| The primary duties and responsibilities of the job, which are:<br>a) _____<br>b) _____<br>c) _____<br>d) _____                                                                                  |                                       |
| Description of the criminal conduct and why the conduct is of concern based on the following factors:<br><br><br><br><br>                                                                       |                                       |
| How long ago did the criminal activity occur:                                                                                                                                                   |                                       |
| Age at the time of the last criminal activity:                                                                                                                                                  |                                       |
| Activities and rehabilitation efforts since criminal activity such as work experience, job training, etc.:<br>a) _____<br>b) _____<br>c) _____<br>d) _____                                      |                                       |
| <b>Based on the factors above, we are considering rescinding our offer of employment because:</b>                                                                                               |                                       |
| Does the conviction history have a direct and adverse relationship with the specific duties of the job that justify denying the applicant the position?<br><br><br><br><br><br><br><br><br><br> |                                       |

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**To be completed for Reassessment (if applicable):**

Was there an error made in the Criminal History Report? If so, what information did the Applicant provide to show an error was made.

Evidence of rehabilitation, good conduct, mitigating evidence, which is:

- a) \_\_\_\_\_
- b) \_\_\_\_\_
- c) \_\_\_\_\_
- d) \_\_\_\_\_

Evidence includes documents that the Applicant attended school, religious institution, job training, or counseling; or is involved with the community. They can include letters from people who know them, like teachers, counselors, supervisors, clergy, and parole or probation officers.

Based on the evidence provided, we are [rescinding][not rescinding] (circle one) our offer of employment because:

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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **STATE ADVERSE ACTION NOTICE BASED ON CRIMINAL HISTORY**

**CALIFORNIA (OUTSIDE OF LOS-ANGELES)**

[Date]

Dear [Applicant/Employee],

On [date], we notified you of our tentative decision to withdraw our conditional offer of employment based on your criminal history. We further notified you of your right to submit documents or information challenging the accuracy of your background screening report, criminal conviction history, evidence of your rehabilitation and/or mitigating circumstances, or all of the above. Regretfully, we must notify you that our decision to withdraw our conditional offer of employment is now final.

We do not offer a right to appeal. You have the right to file a complaint with the California Civil Rights Department if you believe you have been discriminated against unlawfully.

This decision was based in whole or in part on information contained in a consumer report or investigative consumer report. The report was prepared pursuant to your authorization. We also provided you with a copy of your consumer report, a Summary of Your Rights Under the Fair Credit Reporting Act, and to the extent applicable, other legally required notices for your location. The investigative consumer reporting agency providing this report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

The above-named agency did not make the decision to take the adverse employment action and is unable to provide you the specific reasons why the action was taken.

You have the right, pursuant to federal and California law, to obtain an additional free copy of your consumer report / investigative consumer report from the above-named agency, or any national investigative consumer reporting agency. You have sixty (60) days from the date you receive this notice to request this free copy of your consumer report / investigative consumer report.

You also have the right, pursuant to federal and California law, to dispute with the above-named agency the accuracy or completeness of any information contained in your consumer report / investigative consumer report.

Thank you for your interest in working for our company.

Sincerely,

[Client Name]

*Sample documents are provided for educational purposes ONLY and should NOT be construed as legal advice, guidance, or counsel. Clients should consult their own attorney(s) about their compliance responsibilities under the Fair Credit Reporting Act as well as under other federal, state, and local laws and should consult with their own attorney(s) before using any sample. TEAM Background expressly disclaims any warranties, responsibility, or damages associated with or arising out of information or samples provided. For clients seeking credit reports or information, additional notices may be necessary.*

[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **STATE PRE-ADVERSE ACTION NOTICE**

**ILLINOIS**

[Date]

Dear [Applicant/Employee],

As you know, you authorized us to obtain a consumer report and/or investigative consumer report on you in connection with your application for employment or current employment with us. A conditional offer of employment was extended to you on [Date]. This offer of employment was conditioned on a review of your consumer report.

As you may recall, "consumer reports" are reports from consumer reporting agencies and may include driving records, criminal records, credit reports, etc., and "investigative consumer reports" are reports in which information as to character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with neighbors, friends, associates, acquaintances, or others.

The consumer report we ran on you reported that you have criminal conviction(s) as follows:

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This letter is to inform you that we are considering making an employment decision about you (withdrawing our conditional offer of employment to you), based in whole or in part, on your consumer report and/or investigative consumer report. We are conducting an individualized assessment to determine whether the conviction(s) above have a substantial relationship with the position for which you are being considered and/or whether granting or continuing employment would involve unreasonable risk to property or the safety of others. Accordingly, we are providing you with the following attached information:

- a) A copy of the report. The consumer reporting agency providing the report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

- b) a description, in writing, of your rights under the Federal Fair Credit Reporting Act, as prescribed by the Consumer Financial Protection Bureau; and  
c) a copy, in writing, of our individualized assessment.

**You have the right to respond to this notice by providing documents or information challenging the accuracy or completeness of the report. Likewise, we invite you to provide us with: (i) any evidence of your rehabilitation or mitigating circumstances, and/or (ii) any other information relevant to the factors being considered in our individualized assessment.**

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If you have documents or information you wish to submit, you must do so immediately, no later than five (5) business days of your receipt of this letter.

Additionally, if you believe the consumer report is inaccurate, you also have the right to file a dispute with the consumer reporting agency. You may contact them directly at the phone number or email listed above.

Sincerely,

[Client Name]

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## INDIVIDUALIZED ASSESSMENT AND REASSESSMENT FORM ILLINOIS

| INFORMATION                                                                                                                                                   |                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Employer Name:                                                                                                                                                | Applicant Name:                     |
| Position Applied For:                                                                                                                                         | Date of Conditional Offer:          |
| Date of Criminal History Report:                                                                                                                              | Individual Assessment Performed by: |
| Date of Assessment:                                                                                                                                           |                                     |
| <b>Consistent with applicable law, the following factors are considered before making our determination:</b>                                                  |                                     |
| The conviction(s) that we considered as the basis for our preliminary decision are:                                                                           |                                     |
|                                                                                                                                                               |                                     |
| The length of time since the conviction(s) occurred: _____ years _____ months                                                                                 |                                     |
| The number of convictions appearing on your record: _____                                                                                                     |                                     |
| The nature and severity of the conviction and its relationship to the safety and security of others:                                                          |                                     |
|                                                                                                                                                               |                                     |
| The facts or circumstances surrounding the conviction are:                                                                                                    |                                     |
|                                                                                                                                                               |                                     |
| Your age when your conviction occurred: _____ years old                                                                                                       |                                     |
| Evidence of rehabilitation and good conduct, which is listed below:                                                                                           |                                     |
|                                                                                                                                                               |                                     |
| <i>If you have additional documents we should consider, please send them, including but not limited to evidence that you attended school or job training.</i> |                                     |
| <b>Based on the factors above, we are considering rescinding our offer of employment because:</b>                                                             |                                     |
| The specific duties and responsibilities of the job, which are:                                                                                               |                                     |
|                                                                                                                                                               |                                     |



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We believe your record impacts your fitness or ability to perform these duties and responsibilities because (e.g., the employment position offers the opportunity for the same or a similar offense to occur; circumstances leading to the conduct for which you were convicted will recur in the position; or there is unreasonable risk to persons or property):

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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **STATE ADVERSE ACTION NOTICE**

**ILLINOIS**

[Date]

Dear [Applicant/Employee],

This letter is to inform you that your recent application for employment has been denied, or your current employment has been terminated, based in whole or in part, on information contained in your consumer report and/or investigative consumer report.

The consumer report we ran on you reported that you have criminal conviction(s) as follows:

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---

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In making our determination, we considered any information you may have provided challenging the accuracy of your criminal conviction history, evidence of your rehabilitation or mitigating circumstances, and/or any other information you provided for our individualized assessment. A copy of our Individualized Assessment and Re-Assessment Form is attached.

We do not offer a right to appeal. However, you have the right to file a complaint with the Illinois Department of Human Rights.

The report was prepared pursuant to your signed authorization. We also provided you with a copy of your consumer report and a Summary of Your Rights Under the Fair Credit Reporting Act, and to the extent applicable, any other legally required notices. The consumer report was used only for employment purposes and prepared for us by a consumer reporting agency. The consumer reporting agency providing this report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

- a) a description, in writing, of your rights under the Federal Fair Credit Reporting Act, as prescribed by the Consumer Financial Protection Bureau; and
- b) a copy, in writing, of our individualized assessment.

The above-named agency did not make the decision to take the adverse employment action and is unable to provide you the specific reasons why the action was taken.

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You have the right to obtain an additional free copy of your report from the above-named agency, or any national consumer reporting agency. You have sixty (60) days from the date you receive this notice to request a free copy of your report.

Additionally, if you believe the consumer report is inaccurate, you also have the right to file a dispute with the consumer reporting agency. You may contact them directly at the phone number or email listed above.

Thank you for your interest in working for our company.

Sincerely,

[Client Name]

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## INDIVIDUALIZED ASSESSMENT AND REASSESSMENT FORM ILLINOIS

| INFORMATION                                                                                                                                                   |                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Employer Name:                                                                                                                                                | Applicant Name:                     |
| Position Applied For:                                                                                                                                         | Date of Conditional Offer:          |
| Date of Criminal History Report:                                                                                                                              | Individual Assessment Performed by: |
| Date of Assessment:                                                                                                                                           |                                     |
| <b>Consistent with applicable law, the following factors are considered before making our determination:</b>                                                  |                                     |
| The conviction(s) that we considered as the basis for our preliminary decision are:                                                                           |                                     |
|                                                                                                                                                               |                                     |
| The length of time since the conviction(s) occurred: _____ years _____ months                                                                                 |                                     |
| The number of convictions appearing on your record: _____                                                                                                     |                                     |
| The nature and severity of the conviction and its relationship to the safety and security of others:                                                          |                                     |
|                                                                                                                                                               |                                     |
| The facts or circumstances surrounding the conviction are:                                                                                                    |                                     |
|                                                                                                                                                               |                                     |
| Your age when your conviction occurred: _____ years old                                                                                                       |                                     |
| Evidence of rehabilitation and good conduct, which is listed below:                                                                                           |                                     |
|                                                                                                                                                               |                                     |
| <i>If you have additional documents we should consider, please send them, including but not limited to evidence that you attended school or job training.</i> |                                     |
| <b>Based on the factors above, we are considering rescinding our offer of employment because:</b>                                                             |                                     |
| The specific duties and responsibilities of the job, which are:                                                                                               |                                     |
|                                                                                                                                                               |                                     |

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We believe your record impacts your fitness or ability to perform these duties and responsibilities because (e.g., the employment position offers the opportunity for the same or a similar offense to occur; circumstances leading to the conduct for which you were convicted will recur in the position; or there is unreasonable risk to persons or property):

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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **STATE PRE-ADVERSE ACTION NOTICE**

**MASSACHUSETTS**

[Date]

Dear [Applicant/Employee],

You authorized us to obtain a consumer report and/or investigative consumer report on you in connection with your application for employment or current employment with us.

As you may recall, "consumer reports" are reports from consumer reporting agencies and may include driving records, criminal records, credit reports, etc. and "investigative consumer reports" are reports in which information as to character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with neighbors, friends, associates, acquaintances, or others.

The consumer report we ran on you reported that you have criminal conviction(s) as follows:

---

---

---

This letter is to inform you that we are considering making an employment decision about you, based in whole or in part, on your consumer report and/or investigative consumer report. We are conducting an individualized assessment of whether there is a direct relationship between your criminal history and the position you are being considered for. Accordingly, we are providing you with the following information:

- a) A copy of the report. The consumer reporting agency providing the report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

- b) a description, in writing, of your rights under the Federal Fair Credit Reporting Act, as prescribed by the Consumer Financial Protection Bureau.

You have the right to respond to this notice by providing documents or information challenging the accuracy or completeness of the report. Likewise, we invite you to provide us with: (i) any information demonstrating your rehabilitation and good conduct, since the occurrence of the offense(s); and/or (ii) any other information you believe relevant to the criminal history in your report and our assessment of your suitability for the job.

If you have documents or information you wish to submit, you must do so immediately, no later than five (5) days of your receipt of this letter.

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Additionally, if you believe the consumer report is inaccurate, you also have the right to file a dispute with the consumer reporting agency. You may contact them directly at the phone number or email listed above.

Sincerely,

[Client Name]

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## INDIVIDUALIZED ASSESSMENT AND REASSESSMENT FORM

### MASSACHUSETTS

| INFORMATION                                                                                                                                                   |                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Employer Name:                                                                                                                                                | Applicant Name:                     |
| Position Applied For:                                                                                                                                         | Date of Conditional Offer:          |
| Date of Criminal History Report:                                                                                                                              | Individual Assessment Performed by: |
| Date of Assessment:                                                                                                                                           |                                     |
| <b>Consistent with applicable law, the following factors are considered before making our determination:</b>                                                  |                                     |
| The conviction(s) that we considered as the basis for our preliminary decision are:                                                                           |                                     |
|                                                                                                                                                               |                                     |
| The length of time since the conviction(s) occurred: _____ years _____ months                                                                                 |                                     |
| The number of convictions appearing on your record: _____                                                                                                     |                                     |
| The nature and severity of the conviction and its relationship to the safety and security of others:                                                          |                                     |
|                                                                                                                                                               |                                     |
| The facts or circumstances surrounding the conviction are:                                                                                                    |                                     |
|                                                                                                                                                               |                                     |
| Your age when your conviction occurred: _____ years old                                                                                                       |                                     |
| Evidence of rehabilitation and good conduct, which is listed below:                                                                                           |                                     |
|                                                                                                                                                               |                                     |
| <i>If you have additional documents we should consider, please send them, including but not limited to evidence that you attended school or job training.</i> |                                     |
| <b>Based on the factors above, we are considering rescinding our offer of employment because:</b>                                                             |                                     |
| The specific duties and responsibilities of the job, which are:                                                                                               |                                     |
|                                                                                                                                                               |                                     |



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We believe your record impacts your fitness or ability to perform these duties and responsibilities because (e.g., the employment position offers the opportunity for the same or a similar offense to occur; circumstances leading to the conduct for which you were convicted will recur in the position; or there is unreasonable risk to persons or property):

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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **STATE ADVERSE ACTION NOTICE**

**MASSACHUSETTS**

[Date]

Dear [Applicant/Employee],

Your recent application for employment has been denied, or your current employment has been terminated, based in whole or in part, on information contained in a consumer report. The consumer credit reporting agency providing this report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

The consumer reporting agency did not make the decision to take the adverse employment action and is unable to provide you specific reasons why the action was taken.

You have the right to obtain a free copy of your credit report, within sixty (60) days, from the consumer credit reporting agency which has been identified on this notice. The consumer credit reporting agency must provide someone to help you interpret the information on your credit report. Each calendar year, you are entitled to receive, upon request, one (1) free consumer report.

You have the right to dispute inaccurate information by contacting the consumer credit reporting agency directly. You may contact them directly at the phone number or email listed above. If you have notified a consumer credit reporting agency in writing that you dispute the accuracy of information in your file, the agency must then, within thirty (30) business days, re-investigate and modify or remove inaccurate information. The consumer credit reporting agency may not charge a fee for this service.

If re-investigation does not resolve the dispute to your satisfaction, you may send a statement to the consumer credit reporting agency, to be kept in your file, explaining why you think the record is inaccurate. The consumer credit reporting agency must include your statement about the disputed information in a report it issues about you.

Thank you for your interest in working for our company.

Sincerely,

[Client Name]

**[End of Document]**

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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **STATE PRE-ADVERSE ACTION NOTICE**

**NEW JERSEY**

[Date]

Dear [Applicant/Employee],

You authorized us to obtain a consumer report and/or investigative consumer report on you in connection with your application for employment or current employment with us.

As you recall from the disclosure and/or authorization forms, "consumer reports" are reports from consumer reporting agencies and may include driving records, criminal records, credit reports, etc. and "investigative consumer reports" are reports in which information as to character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with neighbors, friends, associates, acquaintances, or others.

This letter is to inform you that we are considering making an employment decision about you (withdrawing our conditional offer of employment), based in whole or in part, on your consumer report and/or investigative consumer report. We are conducting an individualized assessment of whether your conviction history has a direct and adverse relationship with the specific duties of the job you were offered. Accordingly, we are providing you with the following attached information:

- a) A copy of the report. The consumer reporting agency providing the report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

- b) a description, in writing, of your rights under the Federal Fair Credit Reporting Act, as prescribed by the Consumer Financial Protection Bureau.  
c) a description, in writing, of your rights under the New Jersey Fair Credit Reporting Act.

If you believe the information in the report is incorrect and/or would like to provide any additional information related to your report and the information contained therein, please provide us with written notice detailing the inaccuracy or information you would like considered, IMMEDIATELY, no later than five (5) days from your receipt of this letter.

Additionally, if you believe the consumer report is inaccurate, you also have the right to file a dispute with the consumer reporting agency. You may contact them directly at the phone number or email listed above.

Sincerely,

[Client Name]

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## **A Summary of Your Rights** **Under New Jersey's Fair Credit Reporting Act**

Under the New Jersey Fair Credit Reporting Act (NJFCRA or the "Act"), an employer, before taking adverse employment action, is required to provide the applicant or employee with a summary of their rights under the Act with respect to consumer reports or investigative consumer reports obtained for employment purposes from a consumer reporting agency (CRA). This Summary is intended to serve that purpose.

You can find the complete text of the NJCRA, N.J. Stat. §§ 56:11-29 – 56:11-41, at the New Jersey State Legislature's website (<http://www.njleg.state.nj.us/>). You may have additional rights under the Federal Fair Credit Reporting Act, 15 U.S.C. 1681-1681u, which is available on the Internet at the Federal Trade Commission's website (<http://www.ftc.com>).

- **You must consent to the procurement for employment purposes of a report about you.** Before an employer can obtain a report about you from a CRA, the employer must provide you with notice that it will request the report and obtain your consent to that request. A CRA may not give out information about you to the employer, or prospective employer, without your written consent.
- **You must be told if information in your file has been used against you for employment purposes.** An employer who uses information from a consumer or investigative consumer report to take action against you -- such as denying an application for employment or terminating employment -- must tell you that its decision is based in whole or in part on the report. The employer also must provide you with a description of your rights under the NJCRA and a reasonable opportunity to dispute with the CRA any information on which the employer relied.
- **You have a right to know what is in your file.** You may request and obtain all the information about you in the file of a CRA and a list of everyone who has recently requested your file. These disclosures may be made in person, over the telephone or by any other reasonable method available to the CRA. Additionally, you are entitled to one free consumer report every 12 months, upon request. You may be charged a limited fee for a second or subsequent report requested by you during a 12-month period.
- **You have a right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and you notify the consumer reporting agency directly of the dispute, the CRA will reinvestigate without charge and record the current status of the disputed information before the end of 30 business days, unless your dispute is frivolous or irrelevant. The CRA must give you a written report of the investigation.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete or unverifiable information.** Upon completion of the reinvestigation, if the information you disputed is found to be inaccurate or cannot be verified, the CRA will delete the information within 30 days after you dispute it and notify you of the correction. If the reinvestigation does not resolve your dispute, you may file with the CRA a brief statement setting forth the nature of your dispute. The statement will be placed in your consumer file and in any subsequent report containing the information you disputed.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a CRA may not report negative information that is more than seven years old, or bankruptcies that are more than ten years old.
- **You may place a security freeze on your credit report.** A security freeze prevents your credit file from being shared with potential creditors or insurance companies. You may request a security freeze by contacting by calling the following toll-free telephone number(s): TransUnion: 888-909-8872, Experian: 888-397-3742, Equifax: 800-685-1111 (NY residents please call 1-800-349-9960). TransUnion, Experian and Equifax can also be reached at the following addresses:

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Chester, PA 19016  
<https://freeze.transunion.com>

Experian Security Freeze  
P.O. Box 9554  
Allen, TX 75013  
[www.experian.com/freeze](http://www.experian.com/freeze)

Equifax Security Freeze  
P.O. Box 105788  
Atlanta, GA 30348  
<https://www.freeze.equifax.com>

A fee may be charged for providing this service.

- You may seek damages from violators. If a CRA, or in some cases, a user of consumer reports or a furnisher of information to a CRA violates the NJFCRA, you may be able to sue in state court.

**COMPLAINTS**  
**DIVISION OF CONSUMER AFFAIRS**  
Department of Law and Public Safety  
124 Halsey Street  
Newark, NJ 07102  
Phone: 800-242-5846  
973-504-6200

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## INDIVIDUALIZED ASSESSMENT AND REASSESSMENT FORM

### NEW JERSEY

| INFORMATION                                                                                                                                                   |                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Employer Name:                                                                                                                                                | Applicant Name:                     |
| Position Applied For:                                                                                                                                         | Date of Conditional Offer:          |
| Date of Criminal History Report:                                                                                                                              | Individual Assessment Performed by: |
| Date of Assessment:                                                                                                                                           |                                     |
| <b>Consistent with applicable law, the following factors are considered before making our determination:</b>                                                  |                                     |
| The conviction(s) that we considered as the basis for our preliminary decision are:                                                                           |                                     |
| The length of time since the conviction(s) occurred: _____ years _____ months                                                                                 |                                     |
| The number of convictions appearing on your record: _____                                                                                                     |                                     |
| The nature and severity of the conviction and its relationship to the safety and security of others:                                                          |                                     |
| The facts or circumstances surrounding the conviction are:                                                                                                    |                                     |
| Your age when your conviction occurred: _____ years old                                                                                                       |                                     |
| Evidence of rehabilitation and good conduct, which is listed below:                                                                                           |                                     |
| <i>If you have additional documents we should consider, please send them, including but not limited to evidence that you attended school or job training.</i> |                                     |
| <b>Based on the factors above, we are considering rescinding our offer of employment because:</b>                                                             |                                     |
| The specific duties and responsibilities of the job, which are:                                                                                               |                                     |

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We believe your record impacts your fitness or ability to perform these duties and responsibilities because (e.g., the employment position offers the opportunity for the same or a similar offense to occur; circumstances leading to the conduct for which you were convicted will recur in the position; or there is unreasonable risk to persons or property):

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[Applicant/Employee Name]

[Street Address]

[City, State Zip Code]

## **STATE PRE-ADVERSE ACTION NOTICE**

**WASHINGTON (OUTSIDE OF SEATTLE)**

[Date]

Dear [Applicant/Employee],

You authorized us to obtain a consumer report on you in connection with your application for employment or current employment with us. A conditional offer of employment was extended to you on [Date]. This offer of employment was conditioned on a review of your consumer report.

As you recall from the disclosure and/or authorization forms, "consumer reports" are reports from consumer reporting agencies and may include driving records, criminal records, credit reports, etc. and "investigative consumer reports" are reports in which information as to character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with neighbors, friends, associates, acquaintances, or others.

This letter is to inform you that we are considering withdrawing our conditional offer of employment, based in whole or in part, on your consumer report and/or investigative consumer report. We are conducting an individualized assessment of whether your conviction history has a direct and adverse relationship with the specific duties of the job you were offered. Accordingly, we are providing you with the following attached information:

- a) A copy of the report. The consumer reporting agency providing the report was:

TEAM Background, LLC  
8165 S. Mingo Rd #100  
Tulsa, OK 74133  
918-921-4815  
[www.teamqualify.com](http://www.teamqualify.com)  
[consumers@teamqualify.com](mailto:consumers@teamqualify.com)

- b) a description, in writing, of your rights under the Federal Fair Credit Reporting Act, as prescribed by the Consumer Financial Protection Bureau.  
c) A description, in writing, of your rights under the Washington Fair Credit Reporting Act.

If you believe the information in the report is incorrect and would like to dispute or provide any additional information regarding the information in your report, please provide us with written notice detailing the inaccuracy or information you would like considered, within 5 business days of receipt of this letter.

Additionally, if you believe the consumer report is inaccurate, you also have the right to file a dispute with the consumer reporting agency. You may contact them directly at the phone number or email listed above.

Sincerely,

[Client Name]



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## INDIVIDUALIZED ASSESSMENT AND REASSESSMENT FORM

### WASHINGTON (OUTSIDE OF SEATTLE)

| INFORMATION                                                                                                                                            |                                     |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|
| Employer Name:                                                                                                                                         | Applicant Name:                     |
| Position Applied For:                                                                                                                                  | Date of Conditional Offer:          |
| Date of Criminal History Report:                                                                                                                       | Individual Assessment Performed by: |
| Date of Assessment:                                                                                                                                    |                                     |
| <b>Consistent with applicable law, the following factors are considered before making our determination:</b>                                           |                                     |
| The conviction(s) that we considered as the basis for our preliminary decision are:                                                                    |                                     |
| The length of time since the conviction(s) occurred: _____ years _____ months                                                                          |                                     |
| The number of convictions appearing on your record: _____                                                                                              |                                     |
| The nature and severity of the conviction and its relationship to the safety and security of others:                                                   |                                     |
| The facts or circumstances surrounding the conviction are:                                                                                             |                                     |
| Your age when your conviction occurred: _____ years old                                                                                                |                                     |
| Evidence of rehabilitation and good conduct, which is listed below:                                                                                    |                                     |
| If you have additional documents we should consider, please send them, including but not limited to evidence that you attended school or job training. |                                     |
| <b>Based on the factors above, we are considering rescinding our offer of employment because:</b>                                                      |                                     |
| The specific duties and responsibilities of the job, which are:                                                                                        |                                     |

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We believe your record impacts your fitness or ability to perform these duties and responsibilities because (e.g., the employment position offers the opportunity for the same or a similar offense to occur; circumstances leading to the conduct for which you were convicted will recur in the position; or there is unreasonable risk to persons or property):

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## **STATE OF WASHINGTON** **CONSUMER CREDIT REPORTING ACT** **SUMMARY OF CONSUMER RIGHTS**

The State of Washington Fair Credit Reporting Act (WFCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records).

Here is a summary of your major rights under the WFCRA. The WFCRA is modeled after the Federal Fair Credit Reporting Act. The same rights are provided under the Federal Fair Credit Reporting Act and you have received A Summary of Your Rights Under the Federal Fair Credit Reporting Act. You can get the complete text of WFCRA RCW 19.182, from the Washington Code Revisers Office, P.O. Box 40551, Olympia, WA, 98504, or online at <http://apps.leg.wa.gov/rcw/default.aspx?cite=19.182&full=true#19.182.070>.

☐ Under Washington law, we must convey your dispute to the source of the information within five business days after receiving your request for investigation. If we determine that the request is frivolous or irrelevant as defined by the Fair Credit Reporting Act, we will notify you within five business days of the reasons for our decision. The results of our investigation will be sent to you within five business days after the investigation is complete. If you request, we will provide you with the company name, address and telephone number of any person contacted during the investigation. If you believe that a law regulating consumer credit reporting has been violated, you may file a complaint with the Washington State Attorney General's Office. Contact details are below.

☐ **You must be told if information in your file has been used against you.** If a person takes an adverse action against you that is based, in whole or in part, on information contained in a consumer report, that person must tell you, and must give you the name, address, and telephone number of the consumer reporting agency that provided the information.

☐ **You have a right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency, although medical information may be withheld and given directly to your medical provider. You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You will not be charged for:

- ☐ a consumer report if a person has taken adverse action against you because of information in your credit report;
- ☐ the reinvestigation of information you dispute; or
- ☐ corrected reports resulting from the deletion of inaccurate or unverifiable information.

In addition, you are entitled to one free consumer report every 12 months, upon request. You may be charged a limited fee for a second or subsequent report requested by you during a 12 month period.

☐ **You have a right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and you notify the consumer reporting agency directly of the dispute, the

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consumer reporting agency will reinvestigate without charge and record the current status of the disputed information before the end of thirty business days, unless your dispute is frivolous.

- ☐ **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Upon completion of the reinvestigation, if the information you disputed is found to be inaccurate or cannot be verified, the consumer reporting agency will delete the information and notify you of the correction. If the reinvestigation does not resolve your dispute, you may file with the consumer reporting agency a brief statement setting forth the nature of your dispute. The statement will be placed in your consumer file and in any subsequent report containing the information you disputed.
- ☐ **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than ten years old.
- ☐ **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The WFCRA specifies those with a valid need for access.
- ☐ **You must be notified if reports are provided to employers.** A consumer reporting agency may not give out information about you to employers without your knowledge. A potential employer must make a clear and conspicuous disclosure in writing to you or obtain your consent before obtaining a report. A current employer may not receive a report unless it has given you written notice that consumer reports may be used for employment purposes.
- ☐ **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** You may elect not to receive unsolicited “prescreened” offers for credit and insurance by using the consumer reporting agency’s notification system to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- ☐ **You may place a security freeze on your credit report.** A security freeze prevents your credit file from being shared with potential creditors or insurance companies. You may request a security freeze by contacting MicroBilt Corporation at, Attn: Compliance Department, PO Box 440693, Kennesaw, GA 30160, or call the following number: 888-222-7621, or 800-884-4747 option# 5, or fax: 404-393-9512. We may charge a fee for providing this service.
- ☐ **You may be able to block information resulting from identity theft from appearing on your credit report.** If you are a victim of identity theft, a consumer reporting agency must permanently block misinformation resulting from that theft from appearing on your credit report. You must provide the consumer reporting agency with a copy of a police report as evidence of your claim before it can place the block on your report.
- ☐ **You may seek damages from violators.** If a consumer reporting agency, or in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the WFCRA, you may be able to sue in state or federal court.

## COMPLAINTS

Any complaints by consumers under state law may be directed to:

Office of the Attorney General  
Consumer Protection Division  
800 5th Avenue, Suite 2000  
Seattle, Washington 98104-3188  
Phone: 1-800-551-4636 or (206) 464-6684  
Fax: (206) 389-2801

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Statewide Toll-Free TDD: **800 276-9883**

Complaints May Be Made Via U.S. Mail or E-Mail

**Complaints:** <http://www.atg.wa.gov/FileAComplaint.aspx>

(Include your U.S. Mail address with any complaint.)

**Website & Forms:** <http://www.atg.wa.gov/>