

**Certiphi Screening, Inc. (a Vertical Screen Company) 1105 Industrial Highway, Southampton, PA 18966**

### **Authorization and Instructions for Issuance of Consumer Report**

I hereby authorize and instruct Certiphi Screening, Inc. (a Vertical Screen Company) (hereinafter, "Certiphi") to procure a consumer report on me containing the following information:

- |  |  |
|--|--|
| 1. Education history                   | 4. Professional license verification     |
| 2. Employment history                  | 5. State/federal program exclusion (OIG) |
| 3. Social Security number verification | 6. Address verification                  |

Copies of the report(s) shall be provided to me and the University of Pennsylvania Department of Environmental Health and Radiation Safety. I understand that the purpose of procuring such report is for the University's use in connection with my application for irradiator access. I have been given a written summary of my rights under the Fair Credit Reporting Act, and I understand that in the event the University uses any information contained in the consumer report in any adverse decision, before making such decision I will be so advised and provided with another copy of the report as well as a second written summary of my rights under the Fair Credit Reporting Act.

By signing below I also am authorizing all entities having information about me and consulted for the purpose of preparing this report, including but not limited to present and former employers, schools, and references, to release such information to:

Certiphi Screening, Inc.  
P.O. Box 130  
Southampton, PA 18966

This release and authorization shall remain valid and in effect during the period in which I am employed at the University.

\_\_\_\_\_

**Date Authorized Signature**

Full Name: \_\_\_\_\_  
**(PRINT LEGIBLY)**

\* Please list other names or aliases including maiden names: \_\_\_\_\_