

Background Check Result: ☐ Yes ☐ No

Follow-up Needed: ☐ Yes ☐ No

Fingerprinting/Background Check Consent Form

Consent Guidelines

I hereby authorize International Charter Academy of Georgia to receive any criminal and/or driver's history record information pertaining to me, which may be in the files of any state or local criminal justice agency. I further give consent to the school to have my fingerprints taken as part of the employment process and to perform periodic criminal history background checks for the duration of my employment with the school. Fingerprinting for employment as required by O.C.G.A. § 20-2-211.1 is requested by the Superintendent and will be administered by the ICAGeorgia's Human Resources Director.

I understand that neither the GCIC, its employees, nor any other agency or employees of the State of Georgia shall be responsible for the accuracy of information nor have any liability for defamation, invasion of privacy, negligence or any other claim in connection with any dissemination of information pursuant to this record check, and shall be immune from suit based upon any such claims.

By signing this form, I am attesting that I have disclosed any and all previous Criminal and/or Driver's history information requested on the application; and that failure to accurately disclose criminal history information and/or any misstatement or omission of any information requested shall be a reason for non-employment or dismissal from employment.

I also acknowledge that by signing this form I have received the Applicant's Privacy Rights and Privacy Act Statement.

For individuals required to have fingerprinting offsite, including Substitute Teachers, payment will be made directly to the fingerprint location.

Note: Offsite fingerprint charges may vary. If fingerprints are not processed, there will be no

incurred costs.	
Name	
Print	
Date	
INTERNAL OFFICE USE ONLY: Fingerprint Date:	File Closed Date:

Local Agency Security Officer Initial: