



DISCLOSURE OF BACKGROUND INVESTIGATION

Operation Breakthrough, Inc. is providing to you this disclosure of our intent to conduct a background investigation for employment purposes. As a childcare services provider, Operation Breakthrough is required by law to perform background checks on individuals who work with or around children enrolled here prior to employment, annually and periodically throughout employment. This applies to volunteers and contractors as well. Under the Fair Credit Reporting Act (FCRA), any written, oral, or other communication of information provided by a Consumer Reporting Agency (CRA) is an investigative consumer report (background screening). Investigative consumer reports also include employment references, information about your personal characteristics, character, general reputation, mode of living, criminal, driving (if applicable) and work history.

Operation Breakthrough will request background investigations prior to employment, annually and periodically throughout employment from the following Consumer Reporting Agencies (CRAs): Missouri Department of Health & Senior Services Family Care Safety Registry (FCSR) and Missouri Volunteer and Employee Criminal History Service (MOVECHS). Their phone numbers are 1-866-422-6872 and 1-573-526-6153, respectively. The following criminal background checks will be included: child/elder abuse or neglect, sex offender registry check, and fingerprints to include both state and federal bureau of investigation criminal checks. A finding of any history of criminal conviction for a sexual offense or child/elder abuse will preclude you from working here. Other matters may prevent you from working here until further investigation and your history is cleared with the state of Missouri.

More information on the nature and scope of the investigation conducted by the CRA will be made available to you should you desire. Operation Breakthrough, Inc. will not provide you information from previous/ past employers, licensing agencies, educational institutions, volunteer agencies, or personal/ professional references not received from CRAs.

Please sign below to acknowledge your receipt of this disclosure.

DATE OF SIGNATURE

PRINT NAME

SIGNATURE