



# Policy 4.15 – Online Background Check Application Form

## Section 1: Notice of Use

The following document must only be used by a candidate undergoing a third-party background check that is unable to access and complete the background check application online. Please contact The Office of Human Resources, Background Check Coordinator (BCC) at [HR-BackgroundChecks@osu.edu](mailto:HR-BackgroundChecks@osu.edu) before completing this form.

## Section 2: Application

### Personal Information:

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name/Initial \_\_\_\_\_  
 Do you have a maiden name and/or have ever used an alias/other name?  No  Yes \_\_\_\_\_  
 Do you have a Social Security Number (SSN)?  No  Yes  
 Social Security Number (if applicable) \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 \_\_\_\_\_  Male  Female  Rather Not Say  
 Email Address \_\_\_\_\_ Contact Number \_\_\_\_\_ Driver's License Number & State of Issuance \_\_\_\_\_  
 Current Address: Street/City/State/Zip/Country \_\_\_\_\_

### Previous Addresses:

Please provide the last seven (7) years of your address history, including the street, city, state, zip code and country, and dates of residence. Attach additional sheets, if necessary.

Street/City/State/Zip/Country \_\_\_\_\_ Start Date - End Date \_\_\_\_\_  
 Street/City/State/Zip/Country \_\_\_\_\_ Start Date - End Date \_\_\_\_\_  
 Street/City/State/Zip/Country \_\_\_\_\_ Start Date - End Date \_\_\_\_\_

### Self-Disclosure of Criminal Convictions:

Have you been convicted of or been found guilty, entered a guilty plea, or entered a plea of no contest to any misdemeanors or felonies? Misdemeanors include DUI. Providing any false information or omitting any material information on your application materials or in the interview process will be sufficient grounds for rejection of the application, or termination of employment whenever discovered.

No  Yes

If answered "Yes," please provide the following. Attached additional sheets if necessary.

### Conviction Record #1:

Conviction/Offense Name \_\_\_\_\_ Degree (Felony/Misdemeanor) \_\_\_\_\_ Conviction Date (mm/dd/yyyy) \_\_\_\_\_  
 City/State/Zip/Country \_\_\_\_\_

Additional details/circumstances:



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**Conviction Record #2:**

Conviction/Offense Name Degree (Felony/Misdemeanor) Conviction Date (mm/dd/yyyy)

City/State/Zip/Country

Additional details/circumstances:

**Section 3: Disclosure, Authorization, and Consent**

The [Background Check Disclosure and Authorization Form](#) must be carefully read before consenting to the release of consumer reports and/or investigative consumer reports to The Ohio State University for employment, volunteer, or contractor purposes, as applicable. **Please review this information prior to signing below.**

Printed Name

Signature

Date (mm/dd/yyyy)