

Ohio State Highway Patrol

**Notification and  
Authorization for  
Employment Credit Report**

I authorize the Ohio State Highway Patrol to obtain a credit report on my finances through the credit reporting agency of its choice. If employed, I further authorize the Ohio State Highway Patrol to check my credit record, as needed, on a continuing basis as it relates to my employment.

I understand the information received from the credit reporting agency will be reviewed by Ohio State Highway Patrol personnel and will be used to assist the Ohio State Highway Patrol in determining my qualifications for employment purposes.

If an adverse employment decision is made in whole or in part based on the information in the credit report, the Ohio State Highway Patrol will provide me with the source of the credit report, their address and phone number, so I may contact them if I wish. The Ohio State Highway Patrol will also provide me a summary of my rights under the Fair Credit Reporting Act.

**X** \_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
APPLICANT NAME (PRINT)

**X** \_\_\_\_\_  
WITNESS SIGNATURE

\_\_\_\_\_  
DATE