

**STATE JUDICIAL NOMINATION COMMISSION  
AND OFFICE OF THE GOVERNOR  
JOINT JUDICIAL BACKGROUND INFORMATION**

*The following information is not required by law, and will be deemed to have been submitted to the State Judicial Nominating Commission and the Office of the Governor in confidence. The information contained within this application will only be used for purposes of the judicial nomination appointment process. This information will not be made available to public inspection except as required by law.*

**PART 1: If your answer to any of the following is “yes,” please give full details on a separate sheet of paper.**

**(a) Have you ever been arrested?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**(b) Have you ever been charged with, convicted of, pled guilty to, or received a deferred judgment or sentence for any crime or violation, including OWI, DWI, DUI, or reckless driving? Do not include minor traffic offenses resulting in fines of less than \$250.**

Yes \_\_\_\_\_ No \_\_\_\_\_

**(c) Have you ever been investigated for professional misconduct, been the subject of any professional disciplinary proceeding, or had any professional license or permit revoked or restricted upon a finding of professional misconduct? Please include and explain any complaint to a disciplinary body in which you were asked to respond to the complaint, even if the complaint was ultimately dismissed.**

Yes \_\_\_\_\_ No \_\_\_\_\_

**(d) Have you ever been placed on a child abuse, adult abuse, or sex offender registry?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**(e) Have you ever been the subject of a no-contact order?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**(f) Have you ever been assessed, or threatened to be assessed, with a civil or criminal penalty in connection with the reporting of, or failure to report, your federal, state, or local taxes by any local, state, or federal office or agency?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**(g) Have you ever been subject to a tax forfeiture action or have you ever filed for personal or business bankruptcy?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**(h) Have you ever been dishonorably discharged from military service?**

Yes \_\_\_\_\_ No \_\_\_\_\_

**(i) Have you ever been a party to or testified in a criminal or civil court proceeding?**

Yes \_\_\_\_\_ No \_\_\_\_\_

(j) Is there anything else in your past conduct that may raise concerns or that the Commission or the Governor should be aware of? If there is adverse information you are reluctant to disclose, you may disclose it to the Chair and Secretary of the Commission in a separate document. The Chair will disclose it to the other members of the Commission only in a nonpublic session. If you are nominated by the Commission, the information will also be disclosed to the Governor.

Yes \_\_\_\_\_ No \_\_\_\_\_

**PART 2: The State Judicial Nominating Commission, Iowa Judicial Branch Staff, the Governor's Office and the Iowa Department of Public Safety may conduct a background investigation to obtain information about you. Please provide the following information and sign below to permit the investigation to be conducted.**

\_\_\_\_\_  
First Name MI Last Name

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Cell Phone Office Phone Home Phone

\_\_\_\_\_  
Email address

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Driver's License No \_\_\_\_\_ State \_\_\_\_\_

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Month Day Year City State

I certify under penalty of perjury and pursuant to the laws of the State of Iowa that the background information I have provided above is true and correct.

I hereby authorize the State Judicial Nominating Commission, Iowa Judicial Branch, Iowa Department of Public Safety, any professional disciplinary entity, and the Governor's Office to obtain any and all records pertaining to me on file with the Department of Revenue, the Motor Vehicle Division, law enforcement agencies, the Iowa Judicial Branch, other courts, credit references or bureaus, past and present employers, military services, educational institutions, business associates, and acquaintances. I agree that this information may be utilized by the State Judicial Nominating Commission and the Governor's Office for any decision that directly relates to my nomination or appointment to judicial office.

I release from all liability all persons or other entities that supply information. And I indemnify the State Judicial Nominating Commission, Iowa Judicial Branch, Iowa Department of Public Safety, any professional disciplinary entity, and the Governor's Office against any liability that may result from making such requests. This release shall remain in effect so long as my application for nomination and appointment is pending with the State Judicial Nominating Commission or the Governor. And if appointed to judicial office, it shall remain in effect for the length of my employment with the Iowa Judicial Branch. I understand that I may have a right to request additional disclosures regarding the nature and scope of the investigation.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



# STATE OF IOWA

## CREDIT HISTORY DISCLOSURE AUTHORIZATION AND CONSENT FORM

### PLEASE READ CAREFULLY

#### DISCLOSURE

This document serves solely as a clear and conspicuous written disclosure as required by the Federal Fair Credit Reporting Act set forth in Section 604 (b) to the applicant that a credit history check may be obtained for the purpose of this employment/licensing application. By the signature below, the applicant acknowledges that the Iowa Department of Public Safety, Division of Criminal Investigation and **Global Screening Solutions**, have made this disclosure.

#### APPLICANT AUTHORIZATION AND CONSENT FOR RELEASE OF INFORMATION

This release and authorization acknowledges that **Iowa Division of Criminal Investigation** may now, or any time while I am employed/licensed, conduct a verification of my credit history to fulfill the job and/or licensing requirements. The results of this verification process will be used to determine employment/licensing eligibility for the position/license applied for. In the event that information from the report is utilized in whole or in part in making an adverse action decision with regard to your potential employment/licensing, before making the adverse decision, we will provide you with a copy of the consumer report and a description in writing of your rights under the law. I authorize **Global Screening Solutions** at 4833 Front Street B448, Castle Rock, CO 80108, 866-454-2325, customerservice@global-screeningsolutions.com, www.Global-ScreeningSolutions.com, and any of its agents, to disclose orally and in writing the results of this verification process to the designated authorized representative **Iowa Division of Criminal Investigation**. **Contact Global Screening Solutions, if you want to receive a copy of our Information Security Policy.**

**I have read and understand this disclosure, and I authorize the credit history verification.**

I authorize persons and other organizations and Agencies to provide **Global Screening Solutions** with all information that may be requested. I agree that any copy of this document is as valid as the original. According to the Federal Fair Credit Reporting Act, I am entitled to know if employment/licensing was denied based on information obtained through the credit history verification process.

#### CONFIDENTIAL INFORMATION FOR POSITIVE IDENTIFICATION PURPOSES ONLY

Applicant Last Name	First Name	Middle Name
List Other Names Used Number	Date of Birth (For Identification only)	Social Security
Current Address	City/State/Zip	Dates
Previous Address	City/State/Zip	Dates
Previous Address	City/State/Zip	Dates

\_\_\_\_\_  
*Applicant's Signature*

\_\_\_\_\_  
*Today's Date*

← **RELEASE MUST BE SIGNED**

- I understand my credit report will be pulled from TransUnion and wish to receive a copy of the Credit Report from TransUnion directly. (California, Oklahoma, Minnesota residents only).*