COLUMBUS STATE

COMMUNITY COLLEGE

CONTRACTOR BACKGROUND VERIFICATION FORM

Instructions: The full legal name and date of birth must be provided for each of the contractor's employees that may be unescorted and have access to secured Columbus State facilities or systems. Please send completed forms to ContractorAccess@cscc.edu. The form will be returned to the contractor once all submitted employees have been verified. The submitted form will expire on December 31st of the current calendar year. Contractor's employees working for Columbus State cannot have any of the following:

- Felony convictions and/or pending felony charges
- State misdemeanor convictions and/or pending charges for:
  - Sexually oriented crimes
  - Crimes involving violence or dishonesty

Company Name:_____

Access Provided	FULL LEGAL NAME			DATE OF BIRTH	LAST FOUR SSN	APPROVED /DENIED (select one)	ONLY w/CSCC Project MGR Approval	
	LAST	FIRST	MIDDLE INITIAL				FM Photo Taken	PD Card Created

***Contractor's employees will be given default access unless otherwise specified.**

Columbus State Project Manager or Designee

_____ _____ _____

PRINTED NAME SIGNATURE DATE

Columbus State Police Department

_____ _____ _____

PRINTED NAME SIGNATURE DATE