

EMPLOYMENT ADVERSE ACTION LETTER

Date: _____ (mm/dd/yyyy)

Applicant Name: _____

Address: _____

Dear _____,

We regret to inform you that based on our hiring criteria, we are unable to consider you further for an employment opportunity with our organization. This decision was made in part from the information we received from _____. Our employment screening vendor does not make these decisions and is unable to provide you with the specific reasons for them.

In accordance with the Fair Credit Reporting Act, you have previously received a copy of your report and a copy of your consumer rights under the Act. You also have the right to obtain a free copy of your report within 60 days of the receipt of this letter by contacting _____ at the address and telephone number listed below. Please refer to these documents if you have further questions. You have the right to dispute the accuracy or completeness of the information contained in your report by contacting:

Agency name: _____

Agency address: _____

Agency phone number: _____

Any dispute regarding the information on your report must be resolved with

_____.

Thank you for your interest in employment with our organization.

Sincerely,

_____ (Your Name)

_____ (Your Title)