

## Confidential – REQUEST FOR SCORE APPEAL–

This form is for use if you agree that the charges presented in your background check report are correct but you believe that as an industry the facts should be interpreted differently giving rise to a higher score.

Please complete the form below, and email to [support@industryworkinggroup.com](mailto:support@industryworkinggroup.com) Please attach all requested documents and any supporting documents that will help present your request for appeal.

**I understand and agree that by completing and submitting this form I am accepting the following terms:**

I will be submitting my background check report and related personal information to the Industry Working Group Appeal Committee and I understand that members of this Appeal Committee and any related support personnel will have access to this information.

I confirm that all information I provide through whatever means is true and accurate.

I will accept the finding of the Appeal Committee in this matter, I understand that any decisions made in relation to my background check report, including the outcome of this appeal, are between me and my employer or work provider and I confirm I will not hold any member of the Working Group or the Appeal Committee responsible for any outcome that may arise as a result.

**Please complete the following:**

Full name:	Today's Date:
Email as entered in Aspen iRecord®:	Other Preferred Method of contact, if any:

**Please confirm the following:**

I agree that the charges recorded on my background check report are accurate: <i>(If you cannot answer yes to this question, please follow the adverse actions process as advised by your background check company when you received your background check report)</i>	<input type="checkbox"/> YES <input type="checkbox"/> NO
The Case # I wish to have considered is:	
The Disposition Date of this case is:	
The Charge(s) are:	
Sentencing Details:	Incarceration : <input type="checkbox"/> YES <input type="checkbox"/> NO – Duration: Probation: <input type="checkbox"/> YES <input type="checkbox"/> NO – Duration:

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<p>The reason(s) I am requesting this appeal are as follows:</p>	
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