



**Ordering Background Screenings and Drug Tests
Through the First Advantage Program**

For

ATC Residence-Based Businesses ONLY

Updated: November 18, 2007



HOW TO ORDER BACKGROUND SCREENINGS AND DRUG TESTS THROUGH FIRST ADVANTAGE

American Transmission Company, LLC (ATC) has partnered with First Advantage (FADV) to provide and manage the Personnel Risk Assessment process for ATC Suppliers. FADV is prepared to offer whatever assistance you need to make ordering screenings more efficient.

Personnel Risk Assessment (Background Screening) Process

There are specific FCRA laws regarding requests for Social Security Number Verification and Motor Vehicle Reports. These two (2) reports are required by ATC, however, Residence-Based Businesses are not entitled under the FCRA laws to order or receive the Social Security Number or Motor Vehicle Report reports. ATC will assist you by ordering the reports and obtaining the required screening. The Supplier Employee, by signing the release on page 4 of the *Personnel Risk Assessment (PRA) Application*, signifies their knowledge and approval for ATC to receive the entire report. This information will be kept confidential and will not be released to anyone outside of Infrastructure Security.

SECTION 1.0: Ordering Background Screenings

1.1 Fax Application to ATC Infrastructure Security (262-506-6180):

- The Supplier employee will complete the *ATC Personnel Risk Assessment (PRA) Application* located in the **FORMS** section of this document.
- The Supplier will fax this form to ATC Infrastructure Security (262-506-6180) or scan/email to atcsecurity@atcllc.com.

PLEASE NOTE: When ATC receives this application, we will input the information into ScreenDirect and select your company as the one who should receive the bill.

It is the responsibility of the Supplier to provide a copy of the document **Summary of Rights Under the FCRA** to their employee (this is the last 2 pages of the *PRA* form provided by ATC).

1.2 Contact First Advantage with SSN/Date of Birth Notification: It is the responsibility of the **Supplier Employee** to contact First Advantage (Customer Service 1-800-321-4473 ext. 2226) to notify Sue Hadley of their Social Security Number and Date of Birth once ATC Security has input the information. Failure to provide this information will place the screening process on hold until the information is provided. ATC will notify the Supplier when the PRA has been submitted to FADV.

Results: ATC will receive and verify the results of the screening. The completed report can be provided upon request to the Supplier (within the exception of the SSN and MVR).



SPECIAL SCREENINGS

INTERNATIONAL BACKGROUND SCREENS

PRA's that involve international screenings require special handling. Domestic screenings for ATC Suppliers are \$85/per applicant, however, there are additional costs involved as well as processing time with international screenings. If an international screen is required, the Supplier should contact Chuck Jaeger at First Advantage (1-800-321-4473 ext. 2389) to obtain the latest copy of the *FADV International Screening Capabilities Matrix*.

In order to accommodate this type of screening request, the following process should be followed when ordering an international background screen:

- The Supplier Employee will complete the PRA and submit it to the Supplier.
- The Supplier will fax a copy of the PRA to Chuck Jaeger @ FADV (fax number 727-290-4401) to request a quote for the International screening.
- First Advantage will review the PRA to determine the price for the screening and respond via email to the Supplier.
- Once the quote is received, the Supplier will submit the PRA for processing to First Advantage via the method of their choice (web tool or fax).

The purpose of the added step to First Advantage is to provide the Supplier with the cost involved, so they can make a determination whether or not to continue processing their employee for the ATC contract.



SECTION 2.0: DRUG TEST PROCESS

2.1.1 Collection Site Setup

In the account setup package, you completed a *Request for Drug Test Collection Site form*. As part of this process, First Advantage will identify the collection sites that will be available for use in the areas that you selected and will forward a list of sites to you based on the information received.

In the **Forms** section of this package, a *Drug Test Clinic Instructions* sheet is included and should be customized with your company's information. A copy of this document must accompany your employee to the drug test collection site. Please place a copy in the drug test collection package.

If you have not received the information for your drug test collection sites within two (2) days after your account is established or a request is made to First Advantage, please contact Sue Hadley @ 800-321-4473 ext 2226.

2.1.2. Drug Test Fees

The contracted rate for a drug test at one of First Advantage's contracted sites is **\$65.00**/applicant. This price includes hair sample collection, laboratory service (including supplies), and medical review of test results.

Due to specimen collection cost differences, you may not use other non First Advantage-contracted sites unless requested and approved by First Advantage and American Transmission Company. If you have already been utilizing a facility in your area, you may include the contact information for that site. First Advantage can not guarantee that they can use any specific facility that you submit due to requirements for 'hair-only' testing. Also be advised that if a facility charges more than the contracted rate that First Advantage has negotiated, the Supplier will be responsible for those additional costs and use of a non-First Advantage facility must be pre-authorized in advance.

2.1.3. Drug Test Kits

In addition to identifying the collection site, First Advantage will also set-up your laboratory account with LabCorp. As part of the laboratory account set-up, the lab will pre-print Chain of Custody forms for your company. The pre-printed information will contain the name and address of your company and the name and address of First Advantage. Once printed, these forms, along with the hair specimen test kit, will be sent to your company. When you receive the forms and the kits, you are ready to begin testing.

ADDITIONAL DRUG TEST KITS: When additional drug test kits are needed after your account has been established, contact the Customer Service department at 1-800-321-4473 ext. 8.

NOTE: It is HIGHLY recommended that you maintain the drug test forms/kits at your office. As you need to send employees for a drug test, those items should be provided at that time.



2.2 Drug Test Screening

ALL drug tests are conducted using a hair sample. Whenever possible, a sample of hair will be taken from the back of the head of the test subject. If the test subject does not have sufficient head hair, the hair sample will be taken from another area. The most significant difference between hair testing and other methods (i.e., urine, oral fluid testing, etc.) is that hair can detect drug usage as far back as 90 days. Urine and oral fluid testing can only detect drug usage as for the past few days, up to a maximum of 30 days for marijuana.

In order to have the test performed, provide the employee with the following items:

- Name and Address of Drug Test Collection Site
- Drug Test Clinic Instructions Sheet (*Supplier will need to customize form*)
- Chain of Custody Form
- Hair Test Specimen Kit
- DHL Shipment Label (optional)
- DHL Overnight Air Shipment Packaging (optional)

Results of the drug test will be available on First Advantage's ScreenDirect program within 2 to 3 days for a negative result and within 3 to 5 days if the result is positive. ATC will review and verify this information. A copy of the report may be sent to the Supplier upon request.

If you have any questions regarding the drug test screening process, please contact:

FADV Customer Service @ 1-800-321-4473 ext. 8

For problem resolution, please contact:

ATC Account Manager, Rob Pfeiffer @ 1-800-321-4473 ext. 3627

ATC/FADV PERSONNEL RISK ASSESSMENT (PRA) SCREENDIRECT GRADING CRITERIA FOR SUPPLIERS

ScreenDirect Case Level Green Flag/Red Flag:

- + Each case will receive a **GREEN** flag if all graded services have passed with no exceptions or derogatory information.
- + If any service is pending or incomplete, the case will be marked in ScreenDirect with **RED** flag.
- + If any service is graded as a failure or with exception, it will be marked with a **RED** flag.
- + **IMPORTANT:** All screenings will require an approval. **RED** flags will require a detailed explanation in the comments field on the approval screen. **ATC will NOT grant access if this is not completed.**

The following will result in a **RED** flag:

- + **Social Security Number (SSN):**
 - o No record of the applicant and the application is older than 21 years of age
 - o Another individual reported on the SSN trace
- + **Criminal Check (Ordered through a NationScan Plus):**
 - o Courts – Any record is developed
 - o Falsification or withholding of information (i.e., failure to submit conviction information and is found during scan)
- + **Motor Vehicle Report (MVR) :**
 - o No record of driving record based on data provided
 - o Expired, invalid or suspended license
 - o Any accidents or violations reported
- + **Education (Highest Degree):**
 - o Discrepancy in date degree earned (90 days or greater)
 - o No record of enrollment and/or degree earned
 - o Misrepresentation of degree
 - o Hold placed on applicant's records
 - o Any derogatory information developed
- + **Prior Employment (7-Year):**
 - o Discrepancy in dates of employment (90 days or greater)
 - o No record of employment
 - o Misrepresentation of position held
 - o Not eligible for re-hire
 - o Employment terminated by employer
 - o Any derogatory information developed
- + **Residency (7-Year):**
 - o Discrepancy in places of residence
 - o Unable to verify residency
- + **Professional License (if applicable)**
 - o License is not currently active and in good standing
 - o No record of reported license



POST-ACCOUNT SETUP IMPORTANT CONTACT INFORMATION

Client Services – Established Account

(Order background screens, status background screens and drug test results, ordering drug testing supplies, problems/questions with using the internet site, request additional drug test sites, general questions)

Customer Service cs@fadv.com 800-321-4473 ext. 8
FAX NUMBER: 888-753-7186

Accounting and Customer Service Issues

(Invoice questions/problems, customer service unresolved issues/problems, training issues)

Rob Pfeiffer rpfeiffer@fadv.com 800-321-4473 ext. 3627

Drug Test Collection Sites

(need more sites or issues with collection at existing sites)

Sue Hadley shadley@fadv.com 800-321-4473 ext. 2226
FAX NUMBER: 727-290-4402

American Transmission Company – Infrastructure Security

(questions regarding ATC's security requirements, issues/problems with screening process, escalation of issues/problems not resolved with FADV, Excelerate Training, other assistance as needed)

Infrastructure Security Office atcsecurity@atcllc.com 262-506-6199

Supplier Services Staff:

- ✚ Cynthia Gebhardt, Supplier Services Processing
- ✚ Leif Anderson, Administrative Support
- ✚ Betsy Savides, Substation Access Administration

- ✚ Linda Rosenberg, ATC Access Administration and FADV Account Administration



BACKGROUND SCREENING AND DRUG TEST FORMS SECTION

- Fax Order Form (*for Background Screens*) (1 page)
- Drug Test Clinic Instructions (1 page)
- Request for Additional Drug Test Collection Sites (1 page)
- ATC Personnel Risk Assessment Form for Suppliers (6 pages)
(*Background Screen Application*)

**Fax Order Form & Applicant Release
For Background Screenings For
RESIDENCE-BASED BUSINESSES ONLY**



For ATC RESIDENCE-BASED BUSINESS USE ONLY

The Federal Fair Credit Reporting Act (FCRA) provides that anyone who knowingly and willfully obtains information on a consumer from a consumer reporting agency under false pretenses shall be fined or imprisoned up to 2 years, or both.

Company _____ **Contact** _____

Phone _____ **Fax** _____

In accordance with the FCRA, by submitting this order you hereby certify that you:

- Disclosed to applicant, in a separate document, that a consumer report may be obtained.
- Obtained written consent before ordering any reports. Kept the release unless otherwise indicated by code below.
- Will advise the applicant of adverse information if used to deny employment, provide applicant with report and give them consumer rights.
- Will not use the reports in violation of any equal opportunity laws or any other laws.

SERVICE CHOICE:

ATC Supplier Package Code: 19340 (Level 2)

Per Applicant – To include the following:

- Social Security Number (SSN) Verification
- Education Verification (highest level)
- Motor Vehicle Record (MVR) Check
- NationScan Plus Criminal Record Search (7 Years)
- Prior Employment Verification (7 Years)
- Residence Verification (7 Years)
- Professional License Verification (if applicable)

Express & International Services are Available for an Additional Charge

R=Release Required, fax with order. RS=Special Release Required, fax with order.

RSO=Original Special Release Required, mail with order. N=Release must be notarized RSNO _____

Number of Pages in FAX _____ (no cover page please)

To: ATC Infrastructure Security FAX: 1-262-506-6180 Phone: 262-506-6199



DRUG TEST CLINIC INSTRUCTIONS

Note to Supplier: This form must accompany applicant to the screening

The individual presenting this Clinic Instruction document is here at the request of the company listed below. The purpose of today's visit is to provide a hair specimen for a drug test. The Chain of Custody form and Hair Sample Collection Kit will be provided to you by the Applicant.

IMPORTANT NOTICE TO DRUG TEST CLINIC: In order to successfully complete the laboratory process, the specimen collected must be the minimum of the circumference of a pencil (120 strands).

Billing instructions:

Invoices for specimen collection services should be submitted to:

**First Advantage
Attn: MOC 461
P.O. Box 7413
Seminole, FL 33775**

**E-mail Address:
or AP_MOC@fadv.com**

Customer information:

Company Name: _____

Address: _____

City _____ **State** _____ **Zip** _____

Additional information:

The MRO copy of the Chain of Custody form should be faxed to First Advantage per the instructions on the Chain of Custody.

Company Representative: _____

Telephone Number: _____

Fax Telephone Number: _____

Designated Employer Representative (DER) Information (individual who handles drug testing for Supplier company):

DER Name: _____

Telephone Number: _____

Fax Telephone Number: _____



REQUEST FOR ADDITIONAL DRUG TEST COLLECTION SITES

Company Name: _____

FADV Account Number: _____

Mailing Address: _____

Point of Contact: _____

Telephone: _____

Fax: _____

Email: _____

Please identify locations where you will need additional collection sites:

City	State	Zip Code

Specific Site Requests *(may incur a higher hair testing fee)*. Approval to use must be granted by American Transmission Company and First Advantage.

Collection Site Name	Complete Address	Telephone Number

Submitted by: _____ Date _____
(Please print)

SEND THIS FORM VIA FAX TO SUE HADLEY @ 727-290-4402 OR EMAIL shadley@fadv.com