

Disclosure for Consumer Reports

The Company or Employer may obtain information about you for employment purposes (including contract or volunteer services). Thus, you may be the subject of a consumer report, which may include, but is not limited to, public record information, employment, education and license verification, etc. In addition, investigative consumer reports, as defined by the Fair Credit Reporting Act, may be obtained which are gathered from personal interviews with employers and other current or past associates, and may include information about your character, general reputation, personal characteristics, and/or mode of living.

Consumer Report Authorization

I hereby authorize procurement of a consumer report(s) or an investigative consumer report(s). I authorize without reservation any person, business or agency contacted by the consumer reporting agency to furnish the above-mentioned information. All corporations, companies, credit agencies including but not limited to the Trans Union Corporation, financial institutions, are authorized to release all written and verbal information about me. I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification, to the extent that such investigation includes information bearing on my character, general reputation, personal characteristics or mode of living. These reports may be obtained at any time after receipt of my authorization and, if I am hired, throughout my employment, contract period, or volunteer service. I understand I have a right to make a request to the consumer reporting agency: PreScreen Solutions Inc., PO Box 77276, Corona, CA 92877, (888)488-0057, www.prescreensolutions.com, upon proper identification, to obtain copies of reports furnished to Company by PSS. You are entitled to ask your prospective Employer for a copy of your Consumer Rights under the Fair Credit Reporting Act.

Check here if you would like a copy of the Consumer Report.

APPLICANT'S LAST NAME: _____

FIRST NAME: _____ MIDDLE NAME: _____

SOCIAL SECURITY NUMBER: _____-_____-_____

DATE-OF-BIRTH: _____-_____-_____

DRIVER'S LICENSE NO.: _____ STATE: _____

CURRENT ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PREVIOUS ADDRESSES: (City, State & Zip Code for previous seven years)

CITY: _____ STATE: _____ ZIP: _____

CITY: _____ STATE: _____ ZIP: _____

(Please list last two employers starting with your current or last employer)

**CURRENT / LAST
EMPLOYER** _____

ADDRESS _____ CITY _____ ST _____

WORKED FROM _____ TO _____
(Month/ Year) (Month/ Year)

PHONE _____ SUPERVISOR _____

POSITION _____ REASON FOR LEAVING _____

EMPLOYER _____

ADDRESS _____ CITY _____ ST _____

WORKED FROM _____ TO _____
(Month/ Year) (Month/ Year)

PHONE _____ SUPERVISOR _____

POSITION _____ REASON FOR LEAVING _____

EDUCATION

NAME OF INSTITUTION _____

(Please list entire school name. No Abbreviations.)

CITY _____ STATE _____

DEGREE _____ MAJOR _____ DATE CONFERRED _____

APPLICANT'S SIGNATURE: _____

DATE: _____