

AUTHORIZATION FOR BACKGROUND CHECKS

After carefully reading this Background Check Disclosure form, I authorize the Company to order my background report, including investigative consumer reports. I understand that the Company may rely on this authorization to order additional background reports, including investigative consumer reports, during my employment without asking me for my authorization again as allowed by law.

I also authorize the following agencies and entities to disclose to the Background Check Company, or other such companies and its agents, all information about or concerning me, including but not limited to: my past or present employers; learning institutions, including colleges and universities; law enforcement and all other federal, state and local agencies; federal, state and local courts; the military; credit bureaus; testing facilities; motor vehicle records agencies; if applicable, worker's compensation injuries; all other private and public sector repositories of information; and any other person, organization, or agency with any information about or concerning me.

I understand the information obtained will be used to evaluate me for hire, promotion and other job related reasons. I understand that I have the right to dispute or explain any adverse information in a report before a final decision is made. The information listed in the Disclosure can come from private, business, educational or government sources, etc. Some information may come from interviews with those who have information/experience with you (investigative reports). Credit information is generally limited to positions where access to funds/customer information are a part of the job duties.

I also agree that a copy of this form is valid like the signed original. I certify that all of the personal information I provided below is true and correct.

Last Name _____ First _____ Middle _____

Maiden/Other Names _____ Years Used _____

If you live or work for the Company in California, Minnesota or Oklahoma: Check this box if you would like a free copy of your background check report: ☐

Signature _____

_____/_____/_____
Date: (Month/Day/Year)