

RELEASE DISCLOSURE AND AUTHORIZATION

In connection with my application for employment (including contract for services) or at any time during my employment or contract, I agree to allow and hereby authorize _____ to procure and Premier Employment Screening Services to compile a consumer report or investigative consumer report on me. This report may include information as to my character, reputation, mode of living, criminal history, military service, education, academic credentials, qualifications, employment history (including job performance, experience, work habits and reason for termination), personal characteristics, credit and indebtedness, and motor vehicle driving record. This report may contain information from various public and private sources, including without limitation, corporations, courts and law enforcement agencies at the federal, state or local level, courts record repositories, credit bureaus, departments of motor vehicles, past or present employers, educational institutions, governmental licensing or registration entities, the military, business or personal references, and any other source required to verify information that I have voluntarily supplied. I understand that I have the right to request additional disclosures as to the nature and scope of the investigative consumer report. Medical and worker's compensation information will only be requested in compliance with the Federal Americans with Disabilities Act (ADA) and/or any other applicable state laws.

I understand that this report is subject to a federal law, The Fair Credit Reporting Act (FCRA), and that I have been provided with a copy of "A Summary of Your Rights under the Fair Credit Reporting Act." According to the FCRA, I am entitled to know if employment is denied because of information contained in a consumer report and if employment is denied, I will be notified and provided with the name and address of the consumer-reporting agency (also indicated below).

By signing below, I agree to allow and hereby authorize, empower and release from all liability, without reservation, any party, person or agency including, without limitation, present and former employers, credit bureaus, educational institutions, corporations, courts and law enforcement agencies at the federal, state or local level, courts record repositories, departments of motor vehicles, educational institutions, the military and licensing or registration entities, contacted by Premier Employment Screening Services to release information about me, including, without limitation, any of the information described above. I agree that a fax, photocopy or electronic reproduction of this authorization is to be considered and accepted with the same authority as the original.

PLEASE PRINT:

Last Name

First Name

Middle Initial

Other Name(s) Used (attach additional sheet(s) if necessary)

Date(s) You Stopped Using Other Name(s)

Current Street Address

City

State

County

Zip Code

Date of Birth

(The age discrimination act in the employment act of 1967 prohibits discrimination in employment based on age.)

Social Security Number

Current Driver License Number

State of Issue

Expiration Date

Applicant's Signature

Today's Date

These reports will be processed by: *Premier Employment Screening Services 113 S. College Avenue, Fort Collins, CO 80524 or (800) 350-7941.* Questions as to the validity of this authorization may be directed to Premier Employment Screening Services.

- California Applicants:** By checking this box, you disclose you are a resident of CA and will receive a copy of your consumer report. If checked, a copy of the consumer report will be sent within three (3) days of the employer receiving a copy of the consumer report. A summary of the consumer rights provisions of California Civil Code Section 1786.22 have been provided to me.
- Minnesota or Oklahoma Applicants:** By checking this box, you disclose you are a resident of MN or OK and will receive a copy of your consumer report.
- New York Applicants:** If you are applying with a company located in New York, check this box to acknowledge receipt of a copy of Article 23-A of the New York Correction Law.