



DISCLOSURE AND AUTHORIZATION
[IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION]

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

[Employer] (“the Company”) may obtain information about you from a consumer reporting agency for employment purposes. Thus, you may be the subject of a “consumer report” and/or an “investigative consumer report” which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records (“driving records”), verification of your education or employment history, or other background checks. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history conducted by Pre-Employ.com, Inc., Compliance Department, P.O. Box 491570, Redding, California 96049-1570, or by fax to (888) 999-3839, or another outside organization. The scope of this notice and authorization is all-encompassing, however, allowing [Employer] to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and throughout the course of your employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of “consumer reports” and/or “investigative consumer reports” by the Company at any time after receipt of this authorization and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by Pre-Employ.com, Inc., Compliance Department, P.O. Box 491570, Redding, California 96049-1570, or by fax to (888) 999-3839, another outside organization acting on behalf of [Employer], and/or [Employer] itself. I agree that a facsimile (“fax”), electronic or photographic copy of this Authorization shall be as valid as the original.

New York Applicants or Employees only: By signing below, you also acknowledge receipt of Article 23-A of the New York Correction Law.
www.labor.state.ny.us/agencyinfo/PDFs/CorrectionLaw%20Article%2023-A%20_4_.pdf

NEW YORK Applicants or Employees Only: You have the right to inspect and receive a copy of any investigative consumer report requested by [Employer] by contacting the consumer reporting agency identified above directly.

Minnesota and Oklahoma Applicants or Employees only: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

California Applicants or Employees only: By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law.

Last Name _____ First _____ Middle _____
Social Security* # _____ Date of Birth* _____
Signature: _____ Date: _____

** This information will be used for background screening purposes only and will not be used as hiring criteria.*



NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW

_____ (the "Company") intends to obtain information about you from an investigative consumer reporting agency and/or a consumer credit reporting agency for employment purposes. Thus, you can expect to be the subject of "investigative consumer reports" and "consumer credit reports" obtained for employment purposes. Such reports may include information about your character, general reputation, personal characteristics and mode of living. With respect to any investigative consumer report from an investigative consumer reporting agency ("ICRA"), the Company may investigate the information contained in your employment application and other background information about you, including but not limited to obtaining a criminal record report, verifying references, work history, your social security number, your educational achievements, licensure, and certifications, your driving record, and other information about you, and interviewing people who are knowledgeable about you. The results of this report may be used as a factor in making employment decisions. The source of any investigative consumer report (as that term is defined under California law) will be Pre-Employ.com, Inc., P.O. Box 491570, Redding, California 96049-1570, and (800) 300-1821. The source of any credit report will be Pre-Employ.com, Inc., P.O. Box 491570, Redding, California 96049-1570, or (800) 300-1821.

The Company agrees to provide you with a copy of an investigative consumer report when required to do so under California law.

Under *California Civil Code section 1786.22*, you are entitled to find out from an ICRA what is in the ICRA's file on you with proper identification, as follows:

- In person, by visual inspection of your file during normal business hours and on reasonable notice. You also may request a copy of the information in person. The ICRA may not charge you more than the actual copying costs for providing you with a copy of your file.
- A summary of all information contained in the ICRA's file on you that is required to be provided by the California Civil Code will be provided to you via telephone, if you have made a written request, with proper identification, for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or charged directly to you.
- By requesting a copy be sent to a specified addressee by certified mail. ICRAs complying with requests for certified mailings shall not be liable for disclosures to third parties caused by mishandling of mail after such mailings leave the ICRAs.

"Proper Identification" includes documents such as a valid driver's license, social security account number, military identification card, and credit cards. Only if you cannot identify yourself with such information may the ICRA require additional information concerning your employment and personal or family history in order to verify your identity. The ICRA will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information contained in files maintained on you. This written explanation will be provided whenever a file is provided to you for visual inspection.

You may be accompanied by one other person of your choosing, who must furnish reasonable identification. An ICRA may require you to furnish a written statement granting permission to the ICRA to discuss your file in such person's presence.



The following information is for identification purposes only. Please print clearly in Black Ink!

Name: Last	First	Middle	
List all other names used in the last 7 years:			
Date of Birth:	Social Security Number:		
Drivers License Number:	State issued:		
Current Address:			
City:	State:	Zip:	
Address History - Please list the city, state, and zip you have lived or worked in for the past 7 years with approximate dates:			
Dates:	City:	State:	Zip:
Dates:	City:	State:	Zip:
Dates:	City:	State:	Zip:
Daytime phone number: ()	Email Address:		
***** APPLICANT – DO NOT WRITE BELOW THIS LINE *****			

Company ID:	Company Name:	PO#
Please indicate the services you would like to request for this applicant. Fax this sheet to 888-999-3839 or enter the information at https://www.pre-employ.com		
Basic Services Requested:		
Additional Services Requested: Please check box		
<input type="checkbox"/> Social Security Trace	<input type="checkbox"/> Anti Terrorist Watch List	
<input type="checkbox"/> Criminal History Check	<input type="checkbox"/> NCFS	
<input type="checkbox"/> Drivers License Check	<input type="checkbox"/> Civil History	
<input type="checkbox"/> Employment Verification	<input type="checkbox"/> Federal Criminal History	
<input type="checkbox"/> Degree / Education Verification	<input type="checkbox"/> Federal Civil History	
<input type="checkbox"/> Reference Check	<input type="checkbox"/> Sex Offender	
<input type="checkbox"/> OIG/GSA Check	<input type="checkbox"/> Workers Compensation	
<input type="checkbox"/> National Wants and Warrants	<input type="checkbox"/> Drug Test	
<input type="checkbox"/> Credit Report		



**INFORMATION AND AUTHORIZATION FORM FOR REFERENCE, EDUCATION OR
LICENSE VERIFICATION INFORMATION ONLY**

I VOLUNTARILY AND KNOWINGLY AUTHORIZE ANY PRESENT OR PAST EMPLOYER OR SUPERVISOR; COLLEGE OR UNIVERSITY OR OTHER INSTITUTION OF LEARNING; ADMINISTRATOR; LAW ENFORCEMENT AGENCY, STATE AGENCY, LOCAL AGENCY, FEDERAL AGENCY; CREDIT BUREAU; COLLECTION AGENCY; PRIVATE BUSINESS; MILITARY BRANCH OR THE NATIONAL PERSONNEL RECORDS CENTER; PERSONAL REFERENCE; AND/OR OTHER PERSONS TO GIVE RECORDS OR INFORMATION THEY MAY HAVE CONCERNING MY CRIMINAL HISTORY, MOTOR VEHICLE HISTORY, SOCIAL SECURITY NUMBER, EARNINGS HISTORY, CHARACTER, AND EMPLOYMENT (INCLUDING REASONS FOR TERMINATION) OR ANY OTHER INFORMATION REQUESTED BY PREEMPLOY.COM, INC. A PHOTOGRAPHIC OR FAXED COPY OF THIS INFORMATION & RELEASE FORM SHALL BE AS VALID AS THE ORIGINAL.

I HEREBY AUTHORIZE YOU TO PROVIDE INFORMATION TO PRE-EMPLOY.COM INC Phone (800) 300-1821 Fax (888) 999-3839

THE FOLLOWING MUST BE FILLED OUT COMPLETELYPLEASE USE A PEN WITH BLACK INK

(Please Print Clearly)

Name: Last	First	Middle
Home address		
City	State	Zip

Please provide the following information for each company listed on employment application (Use Additional Paper if Necessary):

Company	Dates of Employment	From	To	May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Address				
City	State	Zip		
Position	Supervisor	Telephone (include Area Code)		
Company	Dates of Employment	From	To	May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Address				
City	State	Zip		
Position	Supervisor	Telephone (include Area Code)		
Company	Dates of Employment	From	To	May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Address				
City	State	Zip		
Position	Supervisor	Telephone (include Area Code)		

Please provide the school, university or college name (highest level of education received):

Institution	Institution		
Location	Attendance Dates:	Location	Attendance Dates
Degree	Major/Minor	Degree	Major/Minor
Name used while attending:		Name used while attending:	

Personal References (Individuals with whom you have worked): Professional License Information:

Name:	Phone:	License Type:	License Number:
Name:	Phone:	Issuing Authority:	State:
Name:	Phone:	Issue Date:	Expiration Date:

SIGNATURE: X _____ DATE _____