LEARNING P

BACKGROUND INVESTIGATION AUTHORIZATION

J LEARNING P	Date:				
FULL LEGAL NAME					
SOCIAL SECURITY NO.		DATE OF B	SIRTH		
RACE / ETHNIC ORIGIN	GENDER / SEX				
DRIVER LICENSE NO.	DRIVER LICENSE STATE				
PROFESSIONAL LICENSE NO.		TYPE _		STATE _	
Please list all other names used in a LAST, FIRST, MIDDLE NAME	the past 7 ye Спү	Pars. (AK. Sta		d, Maiden) County	DATES
Please list address for past seven (7 Street Address	7) years. At Cıty	tach add	litional pag ZIP CODE		ed. Dates
INFORMED CON					mployment, a
I understand that in connection with my ap- consumer report may be requested for em- with applicable law including provisions of understand that the employment decision	plication for em aployment purp the Fair Credit	nployment oses. All i Reporting	and, if hired inquiries will g Act, 15 U.S	, during my en be handled in .C. Section 16	n compliance 681, et seq. I
these inquiries. The report may include, bu					trie results of
Verification of social security number; including transcripts; character references from any criminal justice agency in any/all any other public records or to conduct in reputation, or personal characteristics.	s; credit histor federal, state,	y and rep county, j	orts when apurisdictions;	oplicable; crir motor vehicle	ninal records records; and
I hereby waive any and all written notice of federal laws of my past and/or present consideration of my employment and/or forever discharge, without reservation, tagents, contractors, and subcontractors) a employees, and agents) from any liabilities employment or from the disclosure of any in	employer(s), i continued emp the Company (and my past and that may resul	ndividuals loyment b including d/or prese	, or institution the Comp its directors and employers	ions. In exchany, I hereby , officers, er s (their direct	ange for the release and mployees, its cors, officers,
I further acknowledge that an electronic document will be valid and shall be accept also provides acknowledgement that I have	scan, telephor ted with the sa	me author	ity as the or	iginal. My sig	nature below
THIS INFORMED CONSENT AND RELEA AGREE TO RELEASE CERTAIN PERSON LEGAL COUNSEL PRIOR TO ENTERING	NAL RIGHTS.	IT MAY	BE ADVISA		
Signature					
PRINT NAME	Date				

Background Authorization Confidential L3
2016 Copyright ©2016

BACKGROUND INVESTIGATION AUTHORIZATION



DISCLOSURE NOTICE FOR CONSUMER REPORTS

In connection with your application for employment, contract or assignment, information may be obtained about you from a consumer reporting agency. A consumer report and/or investigative consumer report may be requested on you including information about your character, general reputation, personal characteristics and mode of living, employment record, education, qualifications, criminal record, driving record, and/or credit and indebtedness, and many involve personal interviews with sources such as supervisors, friends, neighbors, associates, and public record or law enforcement agencies.

A consumer report and/or an investigative consumer report may be obtained at any time during the application process and if hired, during your continued employment, contract or assignment. A consumer report containing injury and illness records and medical information may be obtained, if required, after a tentative offer of employment has been made. You have the right, upon written request made and after the receipt of this notice, to request a disclosure of the nature and scope of the investigative consumer report.

Before any adverse action is taken, based in whole or in part on the information contained in the consumer report, you will be provided a copy of the report, the name, address and telephone number of the reporting agency, a summary of your rights under the Fair Credit Reporting Act, as well as additional information on your rights under the law.