

Parkwood Heights Pre-Employment Application

Our company is an equal opportunity employer and will consider all applications for all positions equally without regard for race, sex, age, color, religion, national origin, veteran status, genetic information or any disability as defined in the Americans With Disabilities Act, or for any reason protected by State or Federal Law.

This application will be given every consideration, but its receipt does not imply that the applicant will be employed. Each question should be answered in a complete and accurate manner as no action can be taken on this application until all questions have been answered.

PERSONAL INFORMATION

Name: _____ Date: _____
Home Phone: _____ Cell Phone: _____
Email: _____
Address: _____

No. Street

City State Zip

How long have you lived at this address? _____

Social Security Number - - Are you 18 years of age or older? ☐ Yes ☐ No

Are you a citizen of the U.S. or do you have the legal right to be employed in the U.S.? ☐ Yes ☐ No

Do you have the ability, with out without reasonable accomodations, to work overtime or to travel if travel and/or overtime are required by the job for which you are applying? ☐ Yes ☐ No

If No, please explain: _____

Are you subject to any non-compete, non-disclosure or confidentiality agreements, or any other type of agreement with any current or former employer(s) or organization(s) which would limit your ability to work for our company ☐ Yes ☐ No
If yes, please explain _____

(Note: You may be required to provide a copy of any such agreement)

Drivers License: State _____ Type _____ Currently Valid? ☐ Yes ☐ No

Would you be willing and able to relocate? ☐ Yes ☐ No

EMPLOYMENT DESIRED

Are you seeking ☐ full time ☐ part time ☐ temporary or summer employment?

Position applied for _____

Salary Desired _____

Date available to start _____

Have you ever applied to our company before? ☐ Yes ☐ No

Have you ever worked for our company before? ☐ Yes ☐ No

If yes to either of the above questions please state when and/or where you worked. _____

How did you learn of our company and/or the position? _____

Are you now, or do you expect to be, working in any other business or job? ☐ Yes ☐ No

Are there any days or hours you would be unable or unwilling to work? ☐ Yes ☐ No

If Yes, please specify those days and hours _____

Is there any type of work which you will not perform? ☐ Yes ☐ No

If Yes, please explain _____

EDUCATION			
Name, Address and Location		Graduate?	Courses Studied
High School/GED	Circle highest Grade completed 9 10 11 12	<input type="checkbox"/> Yes <input type="checkbox"/> No	Diploma:
College	Circle number of years completed 1 2 3 4 4+	<input type="checkbox"/> Yes <input type="checkbox"/> No	Major: Minor: Degree(s)
Trade School	Number of months attended _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	Diploma or Certificate:
If you did not graduate, why did you leave high school or college? _____ Are you planning to pursue further studies? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, when, where and what courses? _____ _____ List any scholastic honors, offices held and activities involved in during high school and college. (Please exclude those which may reflect race, sex, color, religion, national origin, disability, sexual orientation or other protected status) _____ Please describe any other special courses, seminars or training which may enable you to better perform the duties of the position for which you are applying. _____ _____ _____			
Military			
Have you ever served in the military? <input type="checkbox"/> Yes <input type="checkbox"/> No Service Branch _____ Final Rank _____ What duties, training or experience did you have while in the military which may be job related? _____ _____ _____			
CAPABILITY/RELIABILITY			
Would you be willing and able to perform all of the tasks required by the job you are applying for? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, explain which tasks _____ Have you filed any type of fraudulent claim against any of your present or past employers? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain _____ Will you abide by the safety rules of this company? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you ever been disciplined for violating company safety rules or regulations? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain _____ How many days of work (or school) have you missed in the last two years? _____ How many times have you been late for work (or school) in the last two years? _____ Consistent attendance and punctuality are essential requirements of every job in our company. Would you be willing and able to report to work on time every day on a regular and consistant basis? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, please explain _____ Have you ever been disciplined or received verbal or written warnings for absenteeism or tardiness? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain _____ Have you ever been fired, or asked to resign from a job? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain _____			

WORK HISTORY

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

DO NOT REFERENCE YOUR RESUME**PLEASE GIVE MONTH AND YEAR**

Name of Employer Address City, State, Zip Code		Name and Title of Last Supervisor	Dates Employed		Pay
			From:	To:	Starting
			Mo: ____	Mo: ____	\$ ____
Telephone	Nature of Business	Reason for Leaving	Yr: ____	Yr: ____	\$ ____
Area Code					
Title					

Describe duties performed, skills used/learned, advancements/promotions earned:

Name of Employer Address City, State, Zip Code		Name and Title of Last Supervisor	Dates Employed		Pay
			From:	To:	Starting
			Mo: ____	Mo: ____	\$ ____
Telephone	Nature of Business	Reason for Leaving	Yr: ____	Yr: ____	\$ ____
Area Code					
Title					

Describe duties performed, skills used/learned, advancements/promotions earned:

Name of Employer Address City, State, Zip Code		Name and Title of Last Supervisor	Dates Employed		Pay
			From:	To:	Starting
			Mo: ____	Mo: ____	\$ ____
Telephone	Nature of Business	Reason for Leaving	Yr: ____	Yr: ____	\$ ____
Area Code					
Title					

Describe duties performed, skills used/learned, advancements/promotions earned:

Name of Employer Address City, State, Zip Code		Name and Title of Last Supervisor	Dates Employed		Pay
			From:	To:	Starting
			Mo: ____	Mo: ____	\$ ____
Telephone	Nature of Business	Reason for Leaving	Yr: ____	Yr: ____	\$ ____
Area Code					
Title					

Describe duties performed, skills used/learned, advancements/promotions earned:

Name of Employer Address City, State, Zip Code		Name and Title of Last Supervisor	Dates Employed		Pay
			From:	To:	Starting
			Mo: ____	Mo: ____	\$ ____
Telephone	Nature of Business	Reason for Leaving	Yr: ____	Yr: ____	\$ ____
Area Code					
Title					

Describe duties performed, skills used/learned, advancements/promotions earned:

ADDITIONAL INFORMATION

If you worked in any of your previous positions under another name, please give that name(s) below:

(For reference checking purposes)

Name _____ @ Company _____ Name _____ @ Company _____

Are you presently employed? ☐ Yes ☐ No If yes, may we contact your present employer? ☐ Yes ☐ No

Please list all periods of time since high school or college during which ou were not employed _____

How did you spend this time? _____

What languages do you speak fluently? _____

Special Skills

Do you type? ☐ Yes ☐ No Words Per Minute _____

Please list all software programs in which you are proficient, indicating how many years work experience you have with each: _____

List other computer skills, programming languages, or computer training you have had: _____

List other technical training, skills or work experience which may qualify you for a job with us: _____

Use this space below to describe why you are interested in working for our company and to list those skills and abilities which you feel particularly qualify you for a position with us. If you need jmore space, please continue on a separate sheet. _____

REFERENCES

Give three references, not relatives or former employers

Name	Address	Phone	Occupation

AFFIDAVIT

I certify that my answer to the foregoing questions are true and correct without any consequential omissions of any kind whatsoever. I understand that if I am employed, any false, misleading or otehrwise incorrect statements made on this application form or during any interviews may be grounds for my immediate discharge.

I hereby authorize the Company to contact any company or individual it deems appropriate to investigate my employment history, education, character and qualifications and I give my full and complete consent to their revealing any and all information they wish as a result of this investigation. In addition, I hereby waive my right to bring any cause of action against these individuals for libel, slander, defamation, invasion of privacy or any other reason because of their statements.

I agree that, if I am employed, I will abide by all the rules and regulations of the Company, I understand that the taking of drug and alcohol tests, when given pursuant to company policy, are a condition of continued employment and refusal to take such tests when asked will be grounds for my immediate termination. I also acknowledge that, if I am employed, it is my affirmative responsibility to report to management any evidence of sexual or other illegal forms of harassment immediately. I further understand that nobody in the Company is authorized to enter into any written or verbal employemnt contracts with me for any definite period of time without the express written consent of the President of the Company. I also understand that my employment is at-will and may be terminated by myself or by the Company at any time for any reason or no reason at all, with or without prior notice.

Signature _____

Date ____ / ____ / ____

BACKGROUND CHECK DISCLOSURE DOCUMENT

Parkwood Heights, LLC (the “Company”) may order a “consumer report” (a background report) about you from a consumer reporting agency (CRA) in connection with your employment or your application for employment (including independent contractor or volunteer assignments, as applicable).

The consumer report may include information about your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living. **The Company may not order a consumer report about you without your written authorization** (which you may provide through a separate document called the Authorization for Background Checks).

The Company may also request an “investigative consumer report” on you. An “investigative consumer report” is a type of consumer report that involves personal interviews conducted for the Company by the CRA, most commonly with an individual’s prior employers or references.

You have the right to request more information about the nature and scope of any investigative consumer report obtained on you by contacting the Company.

Additionally, the Fair Credit Reporting Act gives you specific rights in dealing with CRAs. You will find these rights summarized in a separate document titled A Summary of Your Rights Under the Fair Credit Reporting Act.

THE REMAINDER OF THIS DOCUMENT IS INTENTIONALLY LEFT BLANK.

PLEASE PROCEED TO THE NEXT DOCUMENT: “A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT”

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a “security freeze” on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a

security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit. As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
<p>1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:</p>	<p>a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552</p> <p>b. Federal Trade Commission: Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357</p>
<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks</p> <p>b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050</p> <p>b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480</p> <p>c. FDIC Consumer Response Center 1100 Walnut Street, Box # 11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Financial Protection (OCFP) Division of Consumer Compliance Policy and Outreach 1775 Duke Street Alexandria, VA 22314</p>
<p>3. Air carriers</p>	<p>Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590</p>
<p>4. Creditors Subject to the Surface Transportation Board</p>	<p>Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423</p>
<p>5. Creditors Subject to the Packers and Stockyards Act, 1921</p>	<p>Nearest Packers and Stockyards Administration area supervisor</p>
<p>6. Small Business Investment Companies</p>	<p>Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200 Washington, DC 20416</p>
<p>7. Brokers and Dealers</p>	<p>Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549</p>
<p>8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations</p>	<p>Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090</p>
<p>9. Retailers, Finance Companies, and All Other Creditors Not Listed Above</p>	<p>Federal Trade Commission: Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357</p>

NEW YORK CORRECTION LAW
ARTICLE 23-A
LICENSURE AND EMPLOYMENT OF PERSONS PREVIOUSLY
CONVICTED OF ONE OR MORE CRIMINAL OFFENSES

Section 750. Definitions.

751. Applicability.

752. Unfair discrimination against persons previously convicted of one or more criminal offenses prohibited.

753. Factors to be considered concerning a previous criminal conviction; presumption.

754. Written statement upon denial of license or employment.

755. Enforcement.

§750. Definitions. For the purposes of this article, the following terms shall have the following meanings:

- (1) "Public agency" means the state or any local subdivision thereof, or any state or local department, agency, board or commission.
- (2) "Private employer" means any person, company, corporation, labor organization or association which employs ten or more persons.
- (3) "Direct relationship" means that the nature of criminal conduct for which the person was convicted has a direct bearing on his fitness or ability to perform one or more of the duties or responsibilities necessarily related to the license, opportunity, or job in question.
- (4) "License" means any certificate, license, permit or grant of permission required by the laws of this state, its political subdivisions or instrumentalities as a condition for the lawful practice of any occupation, employment, trade, vocation, business, or profession. Provided, however, that "license" shall not, for the purposes of this article, include any license or permit to own, possess, carry, or fire any explosive, pistol, handgun, rifle, shotgun, or other firearm.
- (5) "Employment" means any occupation, vocation or employment, or any form of vocational or educational training. Provided, however, that "employment" shall not, for the purposes of this article, include membership in any law enforcement agency.

§751. Applicability. The provisions of this article shall apply to any application by any person for a license or employment at any public or private employer, who has previously been convicted of one or more criminal offenses in this state or in any other jurisdiction, and to any license or employment held by any person whose conviction of one or more criminal offenses in this state or in any other jurisdiction preceded such employment or granting of a license, except where a mandatory forfeiture, disability or bar to employment is imposed by law, and has not been removed by an executive pardon, certificate of relief from disabilities or certificate of good conduct. Nothing in this article shall be construed to affect any right an employer may have with respect to an intentional misrepresentation in connection with an application for employment made by a prospective employee or previously made by a current employee.

§752. Unfair discrimination against persons previously convicted of one or more criminal offenses prohibited. No application for any license or employment, and no employment or license held by an individual, to which the provisions of this article are applicable, shall be denied or acted upon adversely by reason of the individual's having been previously convicted of one or more criminal offenses, or by reason of a finding of lack of "good moral character" when such finding is based upon the fact that the individual has previously been convicted of one or more criminal offenses, unless:

- (1) There is a direct relationship between one or more of the previous criminal offenses and the specific license or employment sought or held by the individual; or
- (2) the issuance or continuation of the license or the granting or continuation of the employment would involve an unreasonable risk to property or to the safety or welfare of specific individuals or the general public.

§753. Factors to be considered concerning a previous criminal conviction; presumption.

1. In making a determination pursuant to section seven hundred fifty-two of this chapter, the public agency or private employer shall consider the following factors:

- (a) The public policy of this state, as expressed in this act, to encourage the licensure and employment of persons previously convicted of one or more criminal offenses.
- (b) The specific duties and responsibilities necessarily related to the license or employment sought or held by the person.
- (c) The bearing, if any, the criminal offense or offenses for which the person was previously convicted will have on his fitness or ability to perform one or more such duties or responsibilities.
- (d) The time which has elapsed since the occurrence of the criminal offense or offenses.
- (e) The age of the person at the time of occurrence of the criminal offense or offenses.
- (f) The seriousness of the offense or offenses.
- (g) Any information produced by the person, or produced on his behalf, in regard to his rehabilitation and good conduct.
- (h) The legitimate interest of the public agency or private employer in protecting property, and the safety and welfare of specific individuals or the general public.

2. In making a determination pursuant to section seven hundred fifty-two of this chapter, the public agency or private employer shall also give consideration to a certificate of relief from disabilities or a certificate of good conduct issued to the applicant, which certificate shall create a presumption of rehabilitation in regard to the offense or offenses specified therein.

§754. Written statement upon denial of license or employment. At the request of any person previously convicted of one or more criminal offenses who has been denied a license or employment, a public agency or private employer shall provide, within thirty days of a request, a written statement setting forth the reasons for such denial.

§755. Enforcement.

1. In relation to actions by public agencies, the provisions of this article shall be enforceable by a proceeding brought pursuant to article seventy-eight of the civil practice law and rules.
2. In relation to actions by private employers, the provisions of this article shall be enforceable by the division of human rights pursuant to the powers and procedures set forth in article fifteen of the executive law, and, concurrently, by the New York city commission on human rights.

ADDITIONAL BACKGROUND CHECK DISCLOSURES

ADVERSE ACTION AND DISPUTES NOTICE: The consumer reporting agency ADP Screening and Selection Services, Inc. (ADP SASS) will prepare the background report for **Parkwood Heights, LLC** (the “Company”). ADP SASS is located at 301 Remington Street, Fort Collins, CO, 80524, and can be reached by phone at 800-367-5933 or at www.adpselect.com. ADP SASS does not make any decisions to take adverse action. If the Company makes a decision to take adverse action, ADP SASS will not be able to provide specific reasons why the adverse action was taken.

You have the right to obtain a free copy of a consumer report on you from the consumer reporting agency which prepared your background report, under various circumstances, including but not limited to where you receive notice that an adverse action has been taken toward you based on the consumer report. In that instance, you have the right to a free copy of the report provided that you make the request within 60 days of the date that you received the notice of adverse action. You have the right to dispute, with a consumer reporting agency, the accuracy or completeness of any information in a consumer report furnished by the agency.

If you live or work for the Company in New York State, note the following:

NEW YORK: If you submit a request to the Company in writing, you have the right to know whether the Company ordered a consumer report or an investigative consumer report from ADP Screening and Selection Services (ADP SASS) which may contain the following information pertaining to you: credit history; public records; a Social Security number verification; driving records; military service; credentials/certifications; and verification of prior employment and education. You may inspect and order a free copy of the reports by contacting ADP SASS. By signing the separate document called the Authorization for Background Checks, you agree that you have received a copy of Article 23A of the New York Correction Law (provided with this document).

AUTHORIZATION FOR BACKGROUND CHECKS

I authorize **Parkwood Heights LLC** (the “Company”) to obtain a consumer report(s) (or background report(s)) on me, including any investigative consumer reports. I also agree that a copy of this form is valid like the signed original.

The consumer reporting agency (CRA) ADP Screening and Selection Services, Inc. (ADP SASS) will prepare the background report for the Company. ADP SASS is located at 301 Remington Street, Fort Collins, CO, 80524, and can be reached by phone at 800-367-5933 or at www.adpselect.com.

I understand that, as allowed by applicable law, the Company may rely on this authorization to order additional background reports, including investigative consumer reports, (1) during my employment or time as a volunteer or independent contractor, as applicable and (2) from any CRA other than ADP SASS without asking me for my authorization again. I understand the Company may order background report(s) under my legal name and any other names I may have used.

I also authorize the following persons, agencies, and entities to disclose to ADP SASS and its agents all information about or concerning me, as allowed by law, 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. As allowed by law, such disclosures may contain the following information pertaining to you: credit history; public records; a Social Security number verification; driving records; military service; credentials/certifications; and verification of prior employment and education.

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: ☐

Please print your legal name:

Last Name _____ First _____ Middle _____

Signature

____/____/____
Date (Month/Day/Year)

If required, notarize here. When using an embossed seal,
please shade with a pencil before faxing.

Subscribed and sworn before me:

Notary Public Signature

Date

My Commission Expires

BACKGROUND CHECK INFORMATION

The information requested below is collected solely for the purpose of aiding the Consumer Reporting Agency (CRA) in completing a background check on you.

First Name _____ Middle Name (required) _____ Last Name _____ Suffix _____

Email Address: _____

For Identification Purposes Only: Date of Birth ____/____/____ (Month/Day/Year)

Social Security Number _____

Driver's License Number _____ State Issuing License _____

Enter Nickname(s) Used _____

Enter Any Other Names Used (including maiden names):

First Name _____ Middle Name _____ Last Name _____

First Name _____ Middle Name _____ Last Name _____

First Name _____ Middle Name _____ Last Name _____

Addresses Within The Past Seven Years (use a separate sheet as needed)

Present Street Address _____

City/State/ZIP _____

Prior Street Address _____

Prior City/State/ZIP _____

From ____/____/____ (Month/Day/Year) To ____/____/____ (Month/Day/Year)