

*PLEASE READ CAREFULLY*

**DISCLOSURE AND AUTHORIZATION FORM**

SearchPros Staffing (the "Company") will procure a consumer report and/or investigative consumer report on you in connection with your employment application. **Intelius Inc.**, or another consumer reporting agency, will obtain the report for the Company. **Intelius is located at 500 108<sup>th</sup> Avenue NE, 25<sup>th</sup> Floor, Bellevue, WA 98004 and can be reached at 425-974-6100.**

The report will contain information bearing on your character, general reputation, personal characteristics, mode of living and credit standing. The types of information that may be obtained include but are not limited to: credit reports, social security number verification, criminal records checks, public court records checks, driving records checks, educational records checks, verification of employment positions held, personal and professional references checks, licensing and certification checks, etc. The information contained in the report will be obtained from private and/or public record sources, including sources identified by you or through interviews or correspondence with your past or present coworkers, neighbors, friends, associates, current or former employers, educational institutions or other acquaintances.

The nature and scope of any investigative consumer reports that may be requested is explained above. You are nonetheless entitled to request more information about the nature and scope of such reports by submitting a written request to: **Intelius, 500 108<sup>th</sup> Avenue NE, 25<sup>th</sup> Floor, Bellevue, WA 98004.**

The Company is furnishing you with a summary of your rights under the Fair Credit Reporting Act in a form prescribed by the Federal Trade Commission.

**ADDITIONAL STATE LAW NOTICES**

If you live or are applying for a job in the state of California, Maine or New York, please review these additional notices.

**CALIFORNIA:** You may view the file maintained on you by **Intelius, Inc.** You may also obtain a copy of this file, upon submitting proper identification and paying the costs of duplication services, by appearing at **Intelius, Inc.** offices in person, during normal business hours and on reasonable notice, or by mail; you may also receive a summary of the file by telephone.

**MAINE:** You have the right upon request, to be informed of whether an investigative consumer report was requested, and if one was requested, the name and address of the consumer reporting agency furnishing the report. You may request and receive from the Company, within five business days of our receipt of your request, the name, address and telephone number of the nearest unit designated to handle inquiries for the consumer reporting agency issuing an investigative consumer report concerning you. You also have the right, under Maine law, to request and promptly receive from all such consumer reporting agencies copies of any such investigative consumer reports.

**NEW YORK:** You have the right, upon written request, to be informed of whether or not an investigative consumer report was requested. If a consumer report is requested, you will be provided with the name and address of the consumer reporting agency furnishing the report. You may inspect and receive a copy of the report by contacting that agency.



**AUTHORIZATION**

I have carefully read and understand this Disclosure and Authorization form. By my signature below, I consent to the release of consumer reports and investigative consumer reports prepared by a consumer reporting agency, such as **Intelius, Inc.**, to the Company. I understand that if the Company hires me, my consent will apply throughout my employment unless I revoke or cancel it by sending a signed letter to **Intelius, Inc. 500 108<sup>th</sup> Avenue NE, 25<sup>th</sup> Floor, Bellevue, WA 98004**.

I understand that, to the extent allowed by law, information contained in my job application or otherwise disclosed by me before, during or after my employment, if any, may be utilized for the purpose of obtaining consumer reports or investigative consumer reports.

By my signature below, I also authorize the disclosure of information concerning my employment history, earnings history, education, credit history, credit capacity and credit standing, motor vehicle history and standing, criminal history, and all other information deemed pertinent by the consumer reporting agency to the agency by the following: past or present employers; learning institutions, including colleges and universities; law enforcement agencies; federal, state and local courts; the military; credit bureaus; and, motor vehicle records agencies.

**For residents of, or for jobs located in California, Minnesota and Oklahoma only:** You will be provided with a free copy of any consumer reports or investigative consumer reports if you check the box below. You may obtain information or copies from the Company's investigative report file at any time prior to your receipt of such copies, to the extent available, by contacting **Intelius, Inc. at 500 108<sup>th</sup> Avenue NE, 25<sup>th</sup> Floor, Bellevue, WA 98004**. **I request a free copy of the report.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**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 \*\*\*\*\*

**Please indicate the services you would like to request for this applicant.**

**Basic Services Requested:**

**Additional Services Requested: Please check box**

- |   |  |
|---|--|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Social Security Trace</li> <li><input type="checkbox"/> Criminal History Check</li> <li><input type="checkbox"/> Drivers License Check</li> <li><input type="checkbox"/> Employment Verification</li> <li><input type="checkbox"/> Degree / Education Verification</li> <li><input type="checkbox"/> Reference Check</li> <li><input type="checkbox"/> OIG/GSA Check</li> <li><input type="checkbox"/> National Wants and Warrants</li> <li><input type="checkbox"/> Credit Report</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Anti Terrorist Watch List</li> <li><input type="checkbox"/> NCFS</li> <li><input type="checkbox"/> Civil History</li> <li><input type="checkbox"/> Federal Criminal History</li> <li><input type="checkbox"/> Federal Civil History</li> <li><input type="checkbox"/> Sex Offender</li> <li><input type="checkbox"/> Workers Compensation</li> <li><input type="checkbox"/> Drug Test</li> </ul> |
|---|--|

**INFORMATION AND RELEASE 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 Pre-employ.com Inc.

I voluntarily and knowingly unconditionally release any named or unnamed informant from any and all liability resulting from the furnishing of this information.

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 Intelius Inc and/or SearchPros Staffing, LLC  
Phone (425) 974-6100**

**THE FOLLOWING MUST BE FILLED OUT COMPLETELY .....PLEASE 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	State Issued
Name:	Phone:	License Number:	
Name:	Phone:	Issue Date:	Expiration Date:

SIGNATURE: X \_\_\_\_\_ DATE \_\_\_\_\_