

## US Declaration of Understanding and Consent for Background Checks

*To ensure accuracy, you must PRINT in clear CAPITAL letters and complete this form in its entirety.*

In connection with my application for employment (or contract) with **donorworx Inc.** I understand that investigations and requests of consumer reports or investigative consumer reports that may contain public record information may be requested or made on me. These investigations are conducted by BackCheck, 701 Fifth Ave., 42nd Floor, Seattle WA, 98104-5119, Toll-Free Phone: 1-877-308-4663, which acts as an agent of my potential employer. Requests may include consumer credit reports, criminal records, civil court records and other information necessary to complete a pre-employment background check. These reports will include experience information along with reasons for termination of past employment. Furthermore, I understand there will be additional inquiries for information from various State, Federal, Municipal, County, local and other agencies, which may hold information about my past activities.

I hereby authorize without reservation, any present or former employer, school, police department, financial institution, division of motor vehicles, consumer reporting agencies, or other persons or agencies having knowledge about me to furnish BackCheck with any and all background information in their possession regarding myself, in order that my employment qualifications may be evaluated. I also agree that a fax or photocopy of this authorization with my signature be accepted with the same authority as the original.

I hereby understand it is my right to request a copy of the above stated inquiries from BackCheck, upon submission of proper identification and payment of authorized fees.

I authorize BackCheck to release all information obtained to **donorworx Inc.** and in no way hold BackCheck liable upon the release of this information or its findings to my potential employer.

I understand that the following information is for identification (ID) purposes only so that BackCheck can accurately proceed with the assembly of consumer reports. I provide the following personal information for the purposes of the obtaining of consumer reports only. I understand that BackCheck will hold all personal identification information confidential.

I hereby declare that, to the best of my knowledge, the information I have provided both verbally and on my resume/application form is complete and accurate in every respect. I understand that a false statement discovered before, during, or after the assembly of a consumer report or investigative consumer report may disqualify me from employment or cause my subsequent discharge if I am employed.

Given Name(s): ▼			Middle Name(s): ▼		
Surname: ▼				Gender:	<input type="checkbox"/> Female <input checked="" type="checkbox"/> Male
Maiden Name & Other names used, either past or present, including, aliases and nicknames: ▼					
Current Address: ▼					
Unit #	Street #	Street Name		Zip Code	
Current Address Continued: ▼				Years at Address	
City		State	Country		
Previous Address – if less than 7 years ago: ▼					
Unit #	Street #	Street Name		Zip Code	
Previous Address Continued: ▼				Years at Address	
City		State	Country		
Date of Birth: (yyyy/mm/dd) ▼		Social Security Number: ▼		Telephone Number: ▼	
/ /				Ext	
Driver License Number: ▼		State: ▼	Alternate Telephone Number: ▼		Ext

Please print your full name: ▼	
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<b>Please indicate your consent by checking the box following box:</b> <input type="checkbox"/> By checking this box I hereby agree that I have read and understand the above terms and grant permission to BackCheck to furnish a consumer report or investigative consumer report to my employer.		Date: (yyyy/mm/dd) ▼
		/ /

<b>Notice to California Residents:</b>	
If a consumer credit report is ordered, would you like a free copy of the report mailed to your home?	
<input type="checkbox"/> Yes (Please send me a copy of my credit report)	Date: (yyyy/mm/dd) ▼
	/ /

<b>California, Minnesota and Oklahoma Residents Only:</b>	
If you would like to receive a copy of your consumer report obtained by BackCheck, please indicate by checking the following box:	
<input type="checkbox"/> Yes (Please send me a copy of my consumer report)	Date: (yyyy/mm/dd) ▼
	/ /

<b>Service Menu:</b> <input checked="" type="checkbox"/> <b>US BackCheck Package</b> (3 US Single County Criminal Record Check with SSN Trace)	
Company Name: ▼	Date: ▼
<b>Donorworx Inc.</b>	/ /
Hiring Manager: ▼	Telephone No.: ▼
<b>Amanda Celis</b>	<b>416.792.0770</b>
Email Results to: ▼	
<b>amanda@donorworx.com</b>	