

CANDIDATE CONSENT AND DISCLOSURE FORM

| Branch: | Name and Social Security Number: | Name of Group you are Fundraising with: |
|---------|----------------------------------|---|
| | | |

Staff Pro Inc. conducts Standard Pre-Employment Screening (background checks) on all new hires and group labor participants to substantiate their qualifications for employment. I understand that Staff Pro Inc. will utilize the services of *US Investigation Services* (*USIS*) to verify my background is clean from criminal activity. In accordance with the Fair Credit Reporting Act, this information may only be used to verify statement(s) made by an individual in conjunction with legitimate business needs. The depth of information available varies from state to state. The report will be generated for employment purposes only and in compliance with the Fair Credit Reporting Act, the Driver's Protection Act, and any applicable state statute(s).

APPLICANT RELEASE

I understand an investigative report may be generated on me which may include obtaining information from the last seven (7) years regarding, among other items, my character, work habits, performance and experience, along with reasons for termination of past employment, financial/credit history, criminal history records from any criminal justice agency in any or all federal, state, city and county jurisdictions, state Department of Motor Vehicle/Drivers' License Records to include traffic citations and registration, military records from the National Personnel Record Center, education records including transcripts, and requests for records and information from any individual, company, firm corporation, present and/or past employers and public agencies (including the Social Security Administration and the Immigration & Naturalization Service) subject to state and federal law. I fully understand that Staff Pro Inc. and/or their agent, *USIS*, may be requesting information from public and private sources about any of the information noted earlier in this paragraph, and I freely give my consent for Staff Pro Inc. and/or their agent, *USIS*, to do so.

I understand that I have the right to receive notice about the nature and scope of any investigative consumer report requested within five days after Staff Pro Inc. receives my request or five days after the investigative consumer report was requested, whichever is later.

I hereby consent to this investigation and authorize, without reservation, any one contacted by Staff Pro Inc. and/or their agent, *USIS*, to furnish the information as stated above. In order to verify my identity for purposes of the background investigation I am voluntarily releasing my date of birth for my own benefit and fully understand that age is not a consideration of employment. In addition, I agree that a photocopy or telephonic facsimile of this authorization shall be valid as the original. I also understand that I am required to pay the \$12 screening fee and that this fee is non-refundable regardless of the report findings.

| Applicant's Signature | | | Date | E-Mail | | |
|---|--------------------------|-----------|-------------------------|--|----------------------|-----|
| Printed Name (First Name) | (Last Name, Suffix) | |) | Phone | | |
| Maiden Name/Other Names Used | | | | | | |
| Date of Birth (Month, Day, Year) | | check. | Your Social Security nu | A Social Security Number Imber will only be used in o curate background investig | order to confirm you | |
| Current Address | | | City | State | | Zip |
| Permanent Address (if different than Current Address) | | | City | State | | Zip |
| Other cities or towns in which you ha | ave resided over the las | t 7 years | Attach additional for | m if necessary) | | |
| City: | | State: | Zip: | From: | To: | |
| City: | | State: | Zip: | From: | To: | |
| Have you ever been convicted or please explain: | | | Yes | | | |