

U.S. Heating & Air Employment Application Form

PLEASE PRINT ALL INFORMATION REQUESTED IN BLUE OR BLACK INK EXCEPT WHERE SIGNATURE IS REQUIRED	Please mail completed application to: PO Box 519 Easton, MD 21601 Or fax application to: 410-479-4747	OFFICE USE ONLY: Date received: Reviewed by:
---	--	---

PLEASE COMPLETE ALL OF THE FOLLOWING INFORMATION	DATE _____
---	-------------------

Name _____					
Last	First	Middle	Maiden/Other		
Present address _____					
Number	Street	City	State	Zip	
Permanent address _____					
Number	Street	City	State	Zip	
How long at current address? _____			Telephone () _____		
Alternate # () _____		Emergency Contact _____ () _____			
Social Security No. _____ - _____ - _____		Date of Birth _____ / _____ / _____			

Are you under the age of 18: ___ YES ___ NO

If "YES", can you provide proof of your eligibility to work? ___ YES ___ NO

ONLY U.S. CITIZENS OR ALIENS WHO HAVE A LEGAL RIGHT TO WORK IN THE U.S. ARE ELIGIBLE FOR EMPLOYMENT. CAN YOU, UPON EMPLOYMENT PROVIDE GENUINE DOCUMENTATION ESTABLISHING YOUR IDENTITY AND ELIGIBILITY TO BE LEGALLY EMPLOYED IN THE UNITED STATES? [] YES [] NO

Proof of eligibility will be required if hired.

Position applied for _____	Wage desired _____ per hour
Do you know of a relative or friend who is/was employed by Roto-Rooter of Delmarva? _____	
If yes, their name: _____	

Have you ever applied to this company before? _____
Where? _____ When? _____
When are you available to start work? _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Business /Trade/ Professional School				

--	--	--	--	--

Other

Have you ever been convicted of a crime which is substantially related to the functions or qualifications of the job for which you are applying? No Yes

(A Conviction record will not necessarily disqualify you from employment)

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed and type(s) of rehabilitation.

HAVE YOU EVER BEEN DISCHARGED FROM ANY EMPLOYMENT OR ASKED TO RESIGN? YES NO

IF YES, PLEASE EXPLAIN:

What is your means of transportation to work? _____ DO YOU HAVE A VALID DRIVER'S LICENSE: _____

Driver's license number _____ State of issue _____ Expires _____

Commercial (CDL) Class _____ Endorsements _____ Restrictions _____

Have you had any traffic accidents during the past five years? _____ How many? _____

Please Explain: _____

Have you had any moving violations/charges during the past five years? _____ How Many? _____

Please Explain: _____

OFFICE POSITIONS:

Typing Yes No _____ WPM **10-key** Yes No **Word Processing** Yes No _____ WPM

Personal Computer Yes No Excel Word Internet Data Entry

Other Skills: _____

Please use this space to elaborate on any background, experience, or qualifications that you believe should be considered in evaluating your qualifications for employment. You may include hobbies, volunteer experience and any other activities you believe relevant. Please omit any information that would disclose your race, gender, age, marital status, ethnic origin, religious or political affiliations, or disability.

MILITARY:

HAVE YOU EVER BEEN IN THE ARMED FORCES? Yes No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD? Yes No

Specialty _____ Date Entered _____ Discharge Date _____

Type of Discharge: Honorable _____ General _____ Dishonorable _____

ATTENDANCE AND PUNCTUALITY:

Consistent attendance and punctuality are essential requirements of every job with this company. Is there anything which would interfere with your regular attendance and punctuality if you are offered a job with the company? [] YES [] NO

If Yes, please explain:

WORK EXPERIENCE:

Please list your work experience for the **past ten years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of Employer _____ Name of last supervisor _____

Address _____ Employment dates: From _____ To _____

Pay or salary: Start _____ Final _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact your present employer? Yes No

If No, Why? _____

Name of Employer _____ Name of last supervisor _____

Address _____ Employment dates: From _____ To _____

Pay or salary: Start _____ Final _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact this employer? Yes No

If No, Why? _____

Name of Employer _____ **Name of last supervisor** _____

Address _____ **Employment dates: From** _____ **To** _____

_____ **Pay or salary: Start** _____ **Final** _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact this employer? Yes No

If No, Why: _____

Name of Employer _____ **Name of last supervisor** _____

Address _____ **Employment dates: From** _____ **To** _____

_____ **Pay or salary: Start** _____ **Final** _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact this employer? Yes No

If No, Why? _____

Name of Employer _____ **Name of last supervisor** _____

Address _____ **Employment dates: From** _____ **To** _____

_____ **Pay or salary: Start** _____ **Final** _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact this employer? Yes No

If No, Why? _____

Name of Employer _____ Name of last supervisor _____

Address _____ Employment dates: From _____ To _____

_____ Pay or salary: Start _____ Final _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact this employer? Yes No

If No, Why? _____

Name of Employer _____ Name of last supervisor _____

Address _____ Employment dates: From _____ To _____

_____ Pay or salary: Start _____ Final _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact this employer? Yes No

If No, Why? _____

Name of Employer _____ Name of last supervisor _____

Address _____ Employment dates: From _____ To _____

_____ Pay or salary: Start _____ Final _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact this employer? Yes No

If No, Why? _____

Name of Employer _____ Name of last supervisor _____

Address _____ Employment dates: From _____ To _____

_____ Pay or salary: Start _____ Final _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact this employer? Yes No

If No, Why? _____

Name of Employer _____ Name of last supervisor _____

Address _____ Employment dates: From _____ To _____

_____ Pay or salary: Start _____ Final _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact this employer? Yes No

If No, Why? _____

Please list two business/professional references:

Name _____

Name _____

Position _____

Position _____

Company _____

Company _____

Address _____

Address _____

Telephone (____) _____

Telephone (____) _____

Please list two personal references (other than family, spouse or significant other):

Name _____

Name _____

Address _____

Address _____

Telephone (____) _____

Telephone (____) _____

I CERTIFY THAT ALL ANSWERS GIVEN BY ME ARE TRUE, ACCURATE AND COMPLETE, I UNDERSTAND THAT THE FALSIFICATION, MISREPRESENTATION OR OMISSION OF FACT ON THIS APPLICATION (OR ANY OTHER ACCOMPANYING OR REQUIRED DOCUMENTS) WILL BE CAUSE FOR DENIAL OF EMPLOYMENT OR IMMEDIATE TERMINATION OF EMPLOYMENT, REGARDLESS OF WHEN OR HOW DISCOVERED.

Questions regarding this statement should be directed to any employment interviewer before signing. The application will be given every consideration, but its receipt does not imply that the applicant will be employed.

It is the policy of the company to afford equal opportunity to all employees and applicants for employment without regard to age, race, religion, color, sex, national origin, marital status, generic information, and to afford equal opportunities to individuals with a disability, any and other characteristic protected by Federal, State or Local law.

I authorize the investigation of all statements and information contained in this application. I release from all liability anyone supplying such information and I also release the employer from all liability that might result from making an investigation.

If hired, I agree to abide by all of the company rules and regulation, and understand that, if employed, my employment may be terminated with or without cause, and with or without notice, at any time, at the option of either the company or me, I further understand that no representation, whether oral or written by any representative or agent of the company, at any time, can constitute a contract of employment. I understand that the company and all plan administrators shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance or otherwise change all policies, procedures, benefits or other terms or conditions of employment. No representative or agent of the company, has the authority to enter into any agreement for employment for any specified period of time or to make any change in any policy, procedure, benefit or other term or condition of employment other than in a document signed by the President or Executive Vice President, or to make any agreement contrary to the foregoing.

I acknowledge that I have read and understand the above statements and hereby grant permission to confirm the information supplied on this application by me.

APPLICANT SIGNATURE _____ DATE _____

PLEASE PROVIDE THE FOLLOWING IN COLOR AND ENLARGED:

***BIRTH CERTIFICATE *DRIVERS LICENSE *SOCIAL SECURITY CARD**

PROVIDE A CURRENT COPY OF YOUR DRIVING RECORD FROM DEPT. OF MOTOR VEHICLES

Johnson Sewer And Drain Contractors, Inc. T/A Roto-Rooter is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, gender, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with Roto-Rooter of Delmarva T/A Johnson Sewer & Drain depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.

SIGNATURE

DATE

Johnson Sewer And Drain Contractors, Inc. T/A Roto-Rooter

PLEASE READ CAREFULLY APPLICATION FORM WAIVER

As indication that you have read and understood each sentence, please initial in the spaces provided next to each statement, sign and date.

In exchange for the consideration of my job application by Johnson Sewer And Drain Contractors, Inc. T/A Roto-Rooter, (hereinafter called "the Company"), I agree that:

The contents of employee handbooks, personnel manuals, benefit plans, and other documents that provide guidelines regarding employment are "general statements of policies", which management expressly reserves the right to amend, change or cancel in it's sole discretion, at any time____ or to confer any right to remain an employee **Johnson Sewer And Drain Contractors, Inc. T/A Roto-Rooter**, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, _____ and that relationship cannot be altered except by a written instrument signed by the Owner/Managing Member of the Company.____ Both the undersigned and **Johnson Sewer And Drain Contractors, Inc. T/A Roto-Rooter** may end the employment relationship at any time, without specified notice or reason.____ If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits._____

I authorize investigation of all statements contained in this application.____ I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice.____ I hereby give the Company permission to conduct a background investigation, contact schools, all previous employers (unless otherwise indicated), references and others and hereby release the Company from any liability as a result of such contact._____

I understand that, in connection with the routine processing of my employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics and mode of living. ____ Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act. _____

I further understand that my employment with **Johnson Sewer And Drain Contractors, Inc. T/A Roto-Rooter** shall be considered introductory for a period of at least ninety (90) days and further that at any time during the introductory period or thereafter, my employment relationship with **Johnson Sewer And Drain Contractors, Inc. T/A Roto-Rooter** is terminable at will for any reason by either party. _____

Signature of Applicant

Printed Name

Date

**Johnson Sewer And Drain Contractors, Inc. T/A Roto-Rooter
DISCLOSURE AND CONSENT FOR PROCUREMENT OF A CONSUMER AND
INVESTIGATIVE CONSUMER REPORT AND RELEASE AUTHORIZATION**

This form, which you should read carefully, has been provided to you because **Johnson Sewer And Drain Contractors, Inc. T/A Roto-Rooter** ("Company") may request Consumer Reports and/or Investigative Consumer Reports from a consumer-reporting agency. The Company will use any such report(s) solely for employment-related purposes.

Hire Right, Inc., ("Hire Right") located at 2100 Main Street, Suite 400, Irvine, CA 92614. They can be contacted at 800-400-2761. Any such reports may 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, criminal records checks, public court records checks, including civil, driving records, educational records, verification of employment positions held, workers compensation records, personal and professional references, licensing, certification, etc. The information contained in these reports may be obtained by Hire Right from private or public record sources including sources identified by you in your job application or through interviews or correspondence with your past or present coworkers, neighbors, friends, associates, current or former employers, educational institutions or other acquaintances.

CONSENT

I have carefully read and understand this Disclosure and Consent form and, by my signature below, consent to the release of consumer and/or investigative consumer reports, as defined above, to the Company in conjunction with my application for employment. I further understand that any and all information contained in my job application or otherwise disclosed to the Company by me before, during or after my employment, if any, may be utilized for the purpose of obtaining the consumer reports or investigative consumer reports requested by the Company. I understand that if the Company hires me, it may request a consumer report and/or an investigative consumer report about me, as defined above, for employment-related purposes during the course of my employment. I understand that my consent will apply throughout my employment, to the extent permitted by law, unless I revoke or cancel my consent by sending a signed letter or statement to the Company at any time. This Disclosure and Consent form, in original, faxed, photocopied or electronic form, will be valid for any reports that may be requested by the Company.

Last Name _____ **First** _____ **Middle** _____

Maiden/Other Names: _____

Social Security # _____ **Date of Birth (ID Purposes)** _____

Present Address _____

Number **Street** **City** **State** **Zip**

Applicant Signature _____ **Date** _____

MILITARY:

HAVE YOU EVER BEEN IN THE ARMED FORCES? Yes No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD? Yes No

Specialty _____ Date Entered _____ Discharge Date _____

Type of Discharge: Honorable _____ General _____ Dishonorable _____

ATTENDANCE AND PUNCTUALITY:

Consistent attendance and punctuality are essential requirements of every job with this company. Is there anything which would interfere with your regular attendance and punctuality if you are offered a job with the company? [] YES [] NO

If Yes, please explain:

WORK EXPERIENCE:

Please list your work experience for the **past ten years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of Employer _____ Name of last supervisor _____

Address _____ Employment dates: From _____ To _____

Pay or salary: Start _____ Final _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact your present employer? Yes No

If No, Why? _____

Name of Employer _____ Name of last supervisor _____

Address _____ Employment dates: From _____ To _____

Pay or salary: Start _____ Final _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact this employer? Yes No

If No, Why? _____

Name of Employer _____ **Name of last supervisor** _____

Address _____ **Employment dates: From** _____ **To** _____

_____ **Pay or salary: Start** _____ **Final** _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact this employer? Yes No

If No, Why: _____

Name of Employer _____ **Name of last supervisor** _____

Address _____ **Employment dates: From** _____ **To** _____

_____ **Pay or salary: Start** _____ **Final** _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact this employer? Yes No

If No, Why? _____

Name of Employer _____ **Name of last supervisor** _____

Address _____ **Employment dates: From** _____ **To** _____

_____ **Pay or salary: Start** _____ **Final** _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact this employer? Yes No

If No, Why? _____

Name of Employer _____ Name of last supervisor _____

Address _____ Employment dates: From _____ To _____

_____ Pay or salary: Start _____ Final _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact this employer? Yes No

If No, Why? _____

Name of Employer _____ Name of last supervisor _____

Address _____ Employment dates: From _____ To _____

_____ Pay or salary: Start _____ Final _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact this employer? Yes No

If No, Why? _____

Name of Employer _____ Name of last supervisor _____

Address _____ Employment dates: From _____ To _____

_____ Pay or salary: Start _____ Final _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact this employer? Yes No

If No, Why? _____

Name of Employer _____ Name of last supervisor _____

Address _____ Employment dates: From _____ To _____

_____ Pay or salary: Start _____ Final _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact this employer? Yes No

If No, Why? _____

Name of Employer _____ Name of last supervisor _____

Address _____ Employment dates: From _____ To _____

_____ Pay or salary: Start _____ Final _____

Phone number (____) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Reason For Leaving: _____

May we contact this employer? Yes No

If No, Why? _____

Please list two business/professional references:

Name _____

Name _____

Position _____

Position _____

Company _____

Company _____

Address _____

Address _____

Telephone (____) _____

Telephone (____) _____

Please list two personal references (other than family, spouse or significant other):

Name _____

Name _____

Address _____

Address _____

Telephone (____) _____

Telephone (____) _____

I CERTIFY THAT ALL ANSWERS GIVEN BY ME ARE TRUE, ACCURATE AND COMPLETE, I UNDERSTAND THAT THE FALSIFICATION, MISREPRESENTATION OR OMISSION OF FACT ON THIS APPLICATION (OR ANY OTHER ACCOMPANYING OR REQUIRED DOCUMENTS) WILL BE CAUSE FOR DENIAL OF EMPLOYMENT OR IMMEDIATE TERMINATION OF EMPLOYMENT, REGARDLESS OF WHEN OR HOW DISCOVERED.

Questions regarding this statement should be directed to any employment interviewer before signing. The application will be given every consideration, but its receipt does not imply that the applicant will be employed.

It is the policy of the company to afford equal opportunity to all employees and applicants for employment without regard to age, race, religion, color, sex, national origin, marital status, generic information, and to afford equal opportunities to individuals with a disability, any and other characteristic protected by Federal, State or Local law.

I authorize the investigation of all statements and information contained in this application. I release from all liability anyone supplying such information and I also release the employer from all liability that might result from making an investigation.

If hired, I agree to abide by all of the company rules and regulation, and understand that, if employed, my employment may be terminated with or without cause, and with or without notice, at any time, at the option of either the company or me, I further understand that no representation, whether oral or written by any representative or agent of the company, at any time, can constitute a contract of employment. I understand that the company and all plan administrators shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance or otherwise change all policies, procedures, benefits or other terms or conditions of employment. No representative or agent of the company, has the authority to enter into any agreement for employment for any specified period of time or to make any change in any policy, procedure, benefit or other term or condition of employment other than in a document signed by the President or Executive Vice President, or to make any agreement contrary to the foregoing.

I acknowledge that I have read and understand the above statements and hereby grant permission to confirm the information supplied on this application by me.

APPLICANT SIGNATURE _____ DATE _____

PLEASE PROVIDE THE FOLLOWING IN COLOR AND ENLARGED:

***BIRTH CERTIFICATE *DRIVERS LICENSE *SOCIAL SECURITY CARD**

PROVIDE A CURRENT COPY OF YOUR DRIVING RECORD FROM DEPT. OF MOTOR VEHICLES

Johnson Sewer And Drain Contractors, Inc. T/A Roto-Rooter is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, gender, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with Roto-Rooter of Delmarva T/A Johnson Sewer & Drain depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.

SIGNATURE

DATE

Johnson Sewer And Drain Contractors, Inc. T/A Roto-Rooter

PLEASE READ CAREFULLY APPLICATION FORM WAIVER

As indication that you have read and understood each sentence, please initial in the spaces provided next to each statement, sign and date.

In exchange for the consideration of my job application by Johnson Sewer And Drain Contractors, Inc. T/A Roto-Rooter, (hereinafter called "the Company"), I agree that:

The contents of employee handbooks, personnel manuals, benefit plans, and other documents that provide guidelines regarding employment are "general statements of policies", which management expressly reserves the right to amend, change or cancel in it's sole discretion, at any time____ or to confer any right to remain an employee **Johnson Sewer And Drain Contractors, Inc. T/A Roto-Rooter**, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, _____ and that relationship cannot be altered except by a written instrument signed by the Owner/Managing Member of the Company.____ Both the undersigned and **Johnson Sewer And Drain Contractors, Inc. T/A Roto-Rooter** may end the employment relationship at any time, without specified notice or reason.____ If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits._____

I authorize investigation of all statements contained in this application.____ I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice.____ I hereby give the Company permission to conduct a background investigation, contact schools, all previous employers (unless otherwise indicated), references and others and hereby release the Company from any liability as a result of such contact.____

I understand that, in connection with the routine processing of my employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics and mode of living. ____ Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act. ____

I further understand that my employment with **Johnson Sewer And Drain Contractors, Inc. T/A Roto-Rooter** shall be considered introductory for a period of at least ninety (90) days and further that at any time during the introductory period or thereafter, my employment relationship with **Johnson Sewer And Drain Contractors, Inc. T/A Roto-Rooter** is terminable at will for any reason by either party. _____

Signature of Applicant

Printed Name

Date

**Johnson Sewer And Drain Contractors, Inc. T/A Roto-Rooter
DISCLOSURE AND CONSENT FOR PROCUREMENT OF A CONSUMER AND
INVESTIGATIVE CONSUMER REPORT AND RELEASE AUTHORIZATION**

This form, which you should read carefully, has been provided to you because **Johnson Sewer And Drain Contractors, Inc. T/A Roto-Rooter** ("Company") may request Consumer Reports and/or Investigative Consumer Reports from a consumer-reporting agency. The Company will use any such report(s) solely for employment-related purposes.

Hire Right, Inc., ("Hire Right") located at 2100 Main Street, Suite 400, Irvine, CA 92614. They can be contacted at 800-400-2761. Any such reports may 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, criminal records checks, public court records checks, including civil, driving records, educational records, verification of employment positions held, workers compensation records, personal and professional references, licensing, certification, etc. The information contained in these reports may be obtained by Hire Right from private or public record sources including sources identified by you in your job application or through interviews or correspondence with your past or present coworkers, neighbors, friends, associates, current or former employers, educational institutions or other acquaintances.

CONSENT

I have carefully read and understand this Disclosure and Consent form and, by my signature below, consent to the release of consumer and/or investigative consumer reports, as defined above, to the Company in conjunction with my application for employment. I further understand that any and all information contained in my job application or otherwise disclosed to the Company by me before, during or after my employment, if any, may be utilized for the purpose of obtaining the consumer reports or investigative consumer reports requested by the Company. I understand that if the Company hires me, it may request a consumer report and/or an investigative consumer report about me, as defined above, for employment-related purposes during the course of my employment. I understand that my consent will apply throughout my employment, to the extent permitted by law, unless I revoke or cancel my consent by sending a signed letter or statement to the Company at any time. This Disclosure and Consent form, in original, faxed, photocopied or electronic form, will be valid for any reports that may be requested by the Company.

Last Name _____ **First** _____ **Middle** _____

Maiden/Other Names: _____

Social Security # _____ **Date of Birth (ID Purposes)** _____

Present Address _____

Number **Street** **City** **State** **Zip**

Applicant Signature _____ **Date** _____