

DISCLOSURE FOR CONSUMER REPORTS

rent a dwelling with, I understand consumer reports will be requested by you ("Company").
These reports may include, as allowed by law, the following types of information, as applicable: names and dates
of previous employers, reason for termination of employment, work experience, reasons for termination of
tenancy, former landlords, education, accidents, licensure, credit, etc. I further understand that such reports may
contain public record information such as, but not limited to: my driving record, workers' compensation claims, judgments, bankruptcy proceedings, evictions, criminal records, etc., from federal, state, and other agencies that
maintain such records. These reports will be shared with locations where my volunteer work may take place
including without limitation: Falls Creek
In addition, investigative consumer reports (gathered from personal interviews, as applicable, with former
employers or landlords, past or current neighbors and associates of mine, etc.) to gather information regarding my
work or tenant performance, character, general reputation and personal characteristics, and mode of living (lifestyle) may be obtained.
(mestyle) may be obtained.
If I am himd. I and anstead that Common con use this disclosure and authorization to continue to obtain such
If I am hired, I understand that Company can use this disclosure and authorization to continue to obtain such consumer reports throughout my employment, contract period or volunteer service.
consumer reports unoughout my emproyment, contract period or volumeer services
Signature:
Dated:



AUTHORIZATION

I hereby authorize procurement of consumer report(s) and investigative consumer report(s) by Company and its consumer reporting agency Shield Screening, 6810 E. 121st Street South, Bixby, OK 74008. If hired (or contracted), this authorization shall remain on file and shall serve as ongoing authorization for Company to procure such reports at any time during, as permitted by law, my employment, contract, or volunteer period. I authorize without reservation, any person, business or agency contacted by the consumer reporting agency to furnish the above-mentioned information. I authorize the sharing of reports as set forth on the Disclosure.

• 11	check one). Yes, my current employer may be contacted of the contacted of
I understand that I have rights under the l Summary of Rights (initia	Fair Credit Reporting Act, and I acknowledge receipt of the ls).
information regarding any report or use of	mail communication with me to provide me with notices and such report. If I do not have an email address or do not wish U.S. Mail, which will result in slower communication.
If you have any questions concerning this b	eackground screening content, please contact: at
Printed Full Name:	
Signature:	
Date:/	
	; I do not have or want email(Initial)
If "no", list mailing address:	
For identification purposes:	
Social Security No.:	; Date of Birth:
Driver's License No.:	: State of Issue: .