

APPLICANT CONSENT FORM

APPLICANT'S FULL LEGAL NAME:

SOCIAL SECURITY NUMBER: DATE OF BIRTH:

APPLICANT'S ADDRESS:

CITY: STATE: ZIP:

I , fully and voluntarily agree to the checks related to:

1. Salary records
2. Employment data (including dates of employment, job title, location of employment, employee responsibilities, attendance, terms of separation, legal issues, and performance reviews)
3. Any other employment reference related information I have supplied on my application.

I understand that falsification of information on my application may result in the disqualification of further consideration of my application.

Finally, I understand that the results of this screening and the accuracy of my application will be used only as the basis for any financial decision and will be shared with third party, Referee, Inc's Recorded Employee Filing System™. I have also been provided with information to request my Employment Data File from Referee, Inc. at 44349 Lowtree Ave, Suite 114, Lancaster, CA 93534, (833) 879-7333. I further understand that Referee, Inc. is a data furnisher and plays no part in our decision-making process.

By signing this form, I am granting my consent for an initial employment/income verification as well as subsequent verifications deemed necessary throughout the length of my active application and/or active financial obligation with this organization.

The undersigned represents that he or she has read this information in its entirety and understands it.

PRINT APPLICANT NAME

DATE

APPLICANT SIGNATURE