

APPLICANT INFORMATION:

PRINT Last Name

PRINT First Name

Middle Initial

- -

- -

Date of Birth (For Identification Purposes Only)

Social Security Number

Driver's License Number

State Issued

NAME as it appears on Driver's License or State ID _____

Other LEGAL names used within past seven (7) years _____

Current Address - Street _____ City _____ State _____ Zip _____

List all previous addresses for past seven (7) years. (Use separate page if necessary)

Previous Address _____ City _____ State _____ Zip _____

Previous Address _____ City _____ State _____ Zip _____

Previous Address _____ City _____ State _____ Zip _____

Previous Address _____ City _____ State _____ Zip _____

Previous Address _____ City _____ State _____ Zip _____

Previous Address _____ City _____ State _____ Zip _____

CYBERCHEK, LLC
PO Box 45087
Omaha NE 68145
(402) 614-1515
Fax (402) 758-9307

NOTIFICATION OF AND AUTHORIZATION FOR PROCUREMENT OF CONSUMER REPORT

In conjunction with my application for employment (including contract and volunteer services) with you, my prospective employer, I understand that you may hire CyberChek, LLC to obtain "Consumer Reports" about me as defined in the Fair Credit Reporting Act (FCRA). These "Consumer Reports" may include, but are not limited to information concerning my employment history, credentials, motor vehicle record, credit history, education background, and criminal record.

I understand that you may rely on any or all of the above referenced information in determining whether to extend an offer of employment to me. If you contemplate making an adverse employment-related decision that will affect me based, in whole or in part, upon a "Consumer Report" obtained from CyberChek, LLC, I will be provided with a pre-adverse action disclosure, as well as a copy of the "Consumer Report" and a written summary of my "Consumer Rights" under the FCRA before you finalize that decision.

I have read the above disclosure and I hereby authorize CyberChek, LLC or its authorized agents to obtain the above referenced information about me. I also authorize all agencies, bureaus, employers, information service organizations and individuals to provide any of the above referenced knowledge or information they have concerning me. If I am hired, this authorization shall remain on file and shall serve as an ongoing authorization to obtain "Consumer Reports" about me from CyberChek, LLC at any time during my employment with you. A photocopy or facsimile of this authorization shall be as valid as the original.

Signature: _____

Printed Name: _____

Date: _____

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