



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 _____



DISCLOSURE REGARDING BACKGROUND INVESTIGATION IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION

IMKO Enterprises, Inc (“the Company”) may obtain information about you for employment/volunteer or contractor purposes from a third-party consumer reporting agency and may disclose your background check and the information in it to third parties in conjunction with your assignment(s) or proposed assignment(s) to them. Thus, you may be the subject of a “consumer report” which may include information about your character, general reputation, personal characteristics, and/or mode of living. These reports may contain information regarding your criminal history, social security verification, motor vehicle records (“driving records”), verification of your education (including transcripts), or other background checks. You have the right, upon written request made within a reasonable time, to request whether a consumer report has been run about you and to request a copy of your report. These searches will be conducted by Choice Screening, 13000 E. Control Tower Rd. Suite 216, Box L3, Englewood, CO 80112 (702) 974-7882, www.choicescreening.com. The scope of this disclosure is all-encompassing, however, allowing the Company to obtain from any outside organization all manner of consumer reports throughout the course of your assignment or employment to the extent permitted by law.

Signature _____ **Date:** _____

[End of Document]

Page 1 of 1

NOTE: YOU MUST RETURN THIS DOCUMENT



ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the separate document entitled DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand those documents. I hereby authorize the obtaining of “consumer reports” by the Company at any time after receipt of this authorization and throughout my assignment or employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, branch of the military, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by **Choice Screening, 13000 E. Control Tower Rd. Suite 216, Box L3, Englewood, CO 80112 (702) 974-7882, www.choicescreening.com** and/or the Company. I agree that a facsimile (“fax”), electronic or photographic copy of this Authorization shall be as valid as the original.

New York applicants, volunteers, contractors or employees only: Upon request, you will be informed whether or not a consumer report was requested by the Employer, and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. You have the right to inspect and receive a copy of any investigative consumer report requested by the Employer by contacting the consumer reporting agency identified above directly. By signing below, you acknowledge receipt of Article 23-A of the New York Correction Law.

New York applicants, volunteers, contractors or employees only: By signing this form, you acknowledge and authorize the Employer to provide any notices required by federal, state or local law to you at the address(es) and/or email address(es) you provided to the Employer.

Washington State applicants, volunteers, contractors or employees only: You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

Minnesota and Oklahoma applicants, volunteers, contractors or employees only: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

Signature: _____ Date: _____

[End of Document]

Page 1 of 1

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