

# Employment Application

Programs, services and employment are equally available to everyone. Please inform the Human Resources Department if you require reasonable accommodation for the application or interview.

Date of Interview (Month/Day/Year):

/ /

## Applicant Data

How were you referred to us:

Position Applied for:

Full Name:

Address:

City:

State:

Zip:

Phone:

Mobile/Pager/Other:

E-mail:

Date Available to Start:

Social Security Number:

- -

Salary Requirements:

If you are under 18 years of age, can you provide a work permit? ☐ Yes ☐ No If no, please explain:

Have you ever worked for this company? ☐ Yes ☐ No If yes, when?

Are you legally allowed to work in the United States? ☐ Yes ☐ No

Type of employment desired: ☐ Full-Time ☐ Part-Time ☐ Temporary ☐ Seasonal

Have you ever pleaded guilty, no contest or been convicted of a crime? ☐ Yes ☐ No If yes, give dates and details:

Answering yes to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be considered.

Driver's license number (if applicable to position):

State:

## Education History

Name & Location of High School:

Did you graduate?

Name & Location of College:

Years attended:

Degrees completed:

Other Subjects Studied:

Trade, Business or Correspondence School:

Years attended:

Subjects Studied:

Did you graduate:

## Summarize Your Special Skills or Qualifications

## Previous Employment (begin with most recent position)

Dates of Employment: From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_ Position(s) Held: \_\_\_\_\_

Company Name \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Starting Salary and Title: \_\_\_\_\_ Ending Salary and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

May we contact this employer for a reference? ☐ Yes ☐ No

Dates of Employment: From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_ Position(s) Held: \_\_\_\_\_

Company Name \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Starting Salary and Title: \_\_\_\_\_ Ending Salary and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

May we contact this employer for a reference? ☐ Yes ☐ No

Dates of Employment: From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_ Position(s) Held: \_\_\_\_\_

Company Name \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

Starting Salary and Title: \_\_\_\_\_ Ending Salary and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

May we contact this employer for a reference? ☐ Yes ☐ No

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative. This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws."

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

This application for employment is sold only for general use throughout the United States. Adams assumes no responsibility and hereby disclaims any liability for the inclusion in this form of any questions or requests for information upon which a violation of local, state, and/or federal law may be based. It is the user's responsibility to ensure that this form's use complies with applicable laws, which change from time to time.

**FEDERAL REQUIREMENT: SEPARATE, SINGLE-PAGE, WRITTEN DISCLOSURE TO  
CONSUMER AND AUTHORIZATION BY CONSUMER**

**FOR PROCUREMENT OF INVESTIGATIVE CONSUMER REPORT INFORMATION  
THROUGH A CREDIT REPORTING AGENCY**

1. **CLEAR, ACCURATE AND CONSPICUOUS DISCLOSURE** pursuant to the Federal Fair Credit Reporting Act 15 U.S.C. Section 604 (b)(2)(A)(i):

**TO THE CONSUMER:** I am a consumer and understand that this document represents formal notice to me that my employer shall obtain investigative consumer reports (background investigation information) for security purposes and/or employment purposes through CrimShield, Inc., a credit reporting agency.

2. **AUTHORIZATION** pursuant to the Federal Fair Credit Reporting Act 15 U.S.C. Section 604(b)(2)(A)(ii):

- a. Now, and at any time while I am in the employ of my employer, I authorize my employer, through CrimShield, Inc., and its agents, to obtain any information CrimShield or its agents may request to complete a background investigation including, but not limited to, character; general reputation; history of payments; driving record; drug screenings; credit bureau reports from any credit reporting agency; workman comp claims; social security number, addresses and date of birth verifications; judgments; criminal history; public records; social records; private records; evictions and any and all information about me that CrimShield may discover.
- b. I authorize CrimShield, Inc. to release the results of my background investigations (my investigative consumer report) to my employer; to any company where I may transfer after I sign a transfer form, and; to any person, company or entity with whom my employer(s) contracts or associates in the performance of demonstrations, sales, marketing, groundwork, installation, service for or to a customer, or for the delivery of any other service or product.

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**Applicant Signature**

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**Date**

\*\*\*\*\* END OF SEPARATE PAGE \*\*\*\*\*



## FORM A

***MY WRITTEN INSTRUCTIONS FOR INVESTIGATION, CONSUMER REPORT GENERATION,  
REPORTING OF CONSUMER REPORT INFORMATION AND USE OF MY CONSUMER REPORT  
INFORMATION, AND;  
ADDITIONAL INSTRUCTIONS, WAIVERS AND OTHER AGREEMENTS***

In addition to my employer's federally mandated disclosure and authorization pursuant to 15 U.S.C. 1681(b)(2)(a)(i) and (ii) given to me by my employer on a separate one page for my signature, having signed that document, this document contains separate and additional disclosures and notices to me with authorizations and instructions from me, and separate agreements and waivers from me.

I authorize and instruct CrimShield, Inc., or its agents, to obtain my consumer reports, drug test results and my after-hire monitoring of criminal arrests and incarcerations reports, and to release that information to my employer; to any company where I may transfer, and; for security clearance purposes, to any person, company or entity with whom my employer(s) contracts or associates with regarding demonstrations, sales, marketing, groundwork, installation, service for or to a customer, or for the delivery of any other service or product.

Also, for security purposes, I further instruct and request CrimShield to obtain my consumer reports, drug test results and my after-hire monitoring of criminal arrests and incarcerations and release of that information to my employer's clients' and their clients' agents, in order that my employer's clients' may determine whether or not I qualify for their separate security clearance to access their customers, facilities and/or construction sites based on their separate, non-employment security clearance criteria. I understand and agree that my employer's clients' security clearance criteria is separate from my employer's employment hiring criteria and that my employer's clients' security clearance criteria has nothing to do with, is not related to, is not tied to, and is not associated in any manner with my employer's screening processes. However, I understand that to gain access to my employer's clients' customers, facilities and/or construction sites I must pass my employer's clients' security clearance criteria.

I instruct my employer and CrimShield to share the results of my consumer reports, drug test results and my after-hire monitoring of criminal arrests and incarcerations records with my employer's clients that my employer has contracts with to provide sales, marketing, collections, installation and services of various types so that my employer's clients may make a determination whether or not I may have access to my employer's clients' customers, facilities and/or constructions sites. I understand that if I pass my employer's clients' security clearance criteria, I may be issued a security clearance card granting me access to my employer's clients' customers, facilities and/or constructions sites. I understand that my employer's clients make absolutely NO decisions whatsoever about my employment with my employer. I also understand and agree that a security clearance decision by my employer's client(s) is not subject to any individualized assessment as I understand and agree that my employer's client(s) are not my employer, but rather, my employer's employer.

I authorize, direct and instruct any and all governmental agencies, private entities, companies and/or individuals to release any and all information relating to me to the company and/or its agents that is/are performing my background investigation(s). I understand that the background investigation company may need a copy of my social security card, driver license or other personal documentation, including, but not limited to, police reports, plea agreements, probation or parole information and/or other information to complete its investigation for an employment or security investigation and I agree to fully cooperate with the background company and to assist it/them to complete my investigation(s). I understand that if I do not cooperate that the background company has no duty to complete the investigation(s).

In regard to the consumer reporting agency that performed and shared my consumer reports, drug test results and my after- hire monitoring of criminal arrests and incarcerations with any third party , to the extent not prohibited by any applicable law, regulation or statute, I agree, desire, request and instruct that any claim, dispute or controversy arising out of, or in any way related to, or associated with, the investigation; publication or sharing of the investigation and consumer report results or, drug test results; publication or sharing of my after- hire monitoring of criminal arrests and incarcerations; release or reporting of any information regarding my consumer report or any information about me to any third party; or any alleged or actual violation of the Fair Credit Reporting Act, State statute or local rule, law or ordinance to be, and shall be, decided solely and only by arbitration and NOT through any Federal, State or Local court system.

I also separately waive any right to join any claim(s) with claims of others in any form of class action or any similar procedure regarding any claim, dispute or controversy arising out of, or in any way related to, or associated with, including, but not limited to, the investigation; publication or sharing of the investigation, consumer report results or drug test results; publication or sharing of my after-hire monitoring of criminal arrests and incarcerations; release or reporting of any information regarding my consumer report to any third party; or any alleged or actual violation of the Fair Credit Reporting Act, State statute or local rule, law or ordinance, and I understand, desire, request, warrant, agree and instruct that any claim that I may bring, may and shall only be asserted individually.

Furthermore, I separately waive any and all rights to a jury trial or to trial by a judge. Additionally, I separately waive any and all rights to appeal. I further separately agree that Mesa, Arizona is the exclusive venue and jurisdiction for arbitration.

I agree that any cause of action against the credit reporting agency must be filed within one calendar year from the time any claim or cause of action arises, or forever be barred. Notwithstanding anything in this agreement, if there is any clause in the Federal Fair Credit Reporting Act; in any applicable State Fair Credit Reporting Act; in any statute; in any rule; in any regulation; or in any other applicable law or ordinance that prohibits any clause, provision or sentence in this agreement, then that applicable act, statute, regulation, law or ordinance shall govern any prohibited clause, provision or sentence in this agreement and nothing in this agreement shall be viewed as, or considered as, a violation thereof.

I understand and agree that my security clearance approval or denial will be determined solely by my employer's client(s) or its agents and done so pursuant to my employer's clients' security clearance criteria, and not by my employer or by my employer's hiring criteria. I understand that I am entitled to a copy of the background investigation report by requesting a copy in writing to: CrimShield, Inc. P.O. Box 5960, Mesa AZ. 85211.

I acknowledge receipt of a written summary of my rights pursuant to the FCRA 15 U.S.C 1681 relating to credit reporting information regardless of whether the investigation is for employment purposes or security purposes or not.

I certify and warrant that all the information contained in this application and set of instructions and agreements is true and correct. I agree that my Security Clearance may be terminated for any false, misleading, omitted or fraudulent information provided by me to my employer, to my employer's client or to any entity that performs the security clearance investigation.

Drug Screening Policies, when applicable for my employer's clients in relationship to their security clearance criteria, the following shall also apply:

I understand that if a drug screen is required for my employer's client(s) for security clearance purposes for me to have access to my employer's clients' customers, facilities or construction sites and I fail the drug screen, or have previously failed any drug screen for one year subsequent to the date of this authorization, I understand that in that event that I am prohibited from having access to my employer's clients' customers, facilities or construction sites for one year from the date of any failed drug screen. Furthermore, I understand that I shall not be eligible for a Security Clearance with my employer's clients for a one-year period from the date of failure.

I understand that a drug screen failure includes, but is not limited to, the specimen was positive for prohibited drugs; The specimen provided to the lab is outside of the temperature parameters for the lab; I fail to produce a specimen after signing in at the lab; I fail to appear for the scheduled appointment; I sign in, but fail to provide a testable specimen before leaving the lab, or; If there is any indication of tampering or fraud regarding the specimen or by me.

***I also understand that the following information is also REQUIRED for a Security Clearance as determined by my employer's client(s) for access to my employer's client(s) customers, facilities and/or construction sites:***

FULL LEGAL NAME:

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

(Used for identification purpose only) S.S. # \_\_\_\_\_ D.O.B. \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State of issuance: \_\_\_\_\_

Former Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**I have fully read this entire document, understand it and agree to all of its contents, and I have received a copy of my consumer rights pursuant to the Federal Fair Credit Reporting Act.**

\_\_\_\_\_  
**My Signature**

\_\_\_\_\_  
**Date Signed**



## APPLICANT COPY

Para información en español, visite [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

### A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

● **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.

● **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:

- ☐ a person has taken adverse action against you because of information in your credit report;
- ☐ you are the victim of identity theft and place a fraud alert in your file;
- ☐ your file contains inaccurate information as a result of fraud;
- ☐ you are on public assistance;
- ☐ you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) for additional information.

● **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

● **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) for an explanation of dispute procedures.

● **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

● **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

● **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore).

- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).

- The following FCRA right applies with respect to nationwide consumer reporting agencies:

## **CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE**

**You have a right to place a “security freeze” on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization.** The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer’s credit file. Upon seeing a fraud alert display on a consumer’s credit file, a business is required to take steps to verify the consumer’s identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore).

**States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:**





<b>TYPE OF BUSINESS:</b>	<b>CONTACT:</b>
1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates  b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:	a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552  b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357
2. To the extent not included in item 1 above: a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks  b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act.  c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations  d. Federal Credit Unions	a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050  b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480  c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106  d. National Credit Union Administration Office of Consumer Financial Protection (OCFP) Division of Consumer Compliance Policy and Outreach 1775 Duke Street Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590
4. Creditors Subject to the Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423
5. Creditors Subject to the Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200 Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357



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## Remedying the Effects of Identity Theft

You are receiving this information because you have notified a consumer reporting agency that you believe that you are a victim of identity theft. Identity theft occurs when someone uses your name, Social Security number, date of birth, or other identifying information, without authority, to commit fraud. For example, someone may have committed identity theft by using your personal information to open a credit card account or get a loan in your name. For more information, visit [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore) or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

The Fair Credit Reporting Act (FCRA) gives you specific rights when you are, or believe that you are, the victim of identity theft. Here is a brief summary of the rights designed to help you recover from identity theft.

**1. You have the right to ask that nationwide consumer reporting agencies place “fraud alerts” in your file to let potential creditors and others know that you may be a victim of identity theft.** A fraud alert can make it more difficult for someone to get credit in your name because it tells creditors to follow certain procedures to protect you. It also may delay your ability to obtain credit. You may place a fraud alert in your file by calling just one of the three nationwide consumer reporting agencies. As soon as that agency processes your fraud alert, it will notify the other two, which then also must place fraud alerts in your file.

- Equifax: 1-800-525-6285; [www.equifax.com](http://www.equifax.com)
- Experian: 1-888-397-3742; [www.experian.com](http://www.experian.com)
- TransUnion: 1-800-680-7289; [www.transunion.com](http://www.transunion.com)

An initial fraud alert stays in your file for at least one year. An extended alert stays in your file for seven years. To place either of these alerts, a consumer reporting agency will require you to provide appropriate proof of your identity, which may include your Social Security number. If you ask for an extended alert, you will have to provide an identity theft report. An identity theft report includes a copy of a report you have filed with a federal, state, or local law enforcement agency, and additional information a consumer reporting agency may require you to submit. For more detailed information about the identity theft report, visit [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore).

**2. You have the right to free copies of the information in your file (your “file disclosure”).**

An initial fraud alert entitles you to a copy of all the information in your file at each of the three nationwide agencies, and an extended alert entitles you to two free file disclosures in a 12-month period following the placing of the alert. These additional disclosures may help you detect signs of fraud, for example, whether fraudulent accounts have been opened in your name or whether someone has reported a change in your address. Once a year, you also have the right to a free copy of the information in your file at any consumer reporting agency, if you believe it has inaccurate information due to fraud, such as identity theft. You also have the ability to obtain additional free file disclosures under other provisions of the FCRA. See [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore).

**3. You have the right to obtain documents relating to fraudulent transactions made or accounts opened using your personal information.** A creditor or other business must give you copies of applications and other business records relating to transactions and accounts that resulted from the theft of your identity, if you ask for them in writing. A business may ask you for proof of your identity, a police report, and an affidavit before giving you the documents. It may also specify an address for you to send your request. Under certain circumstances a business can refuse to provide you with these documents. See [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore).

**4. You have the right to obtain information from a debt collector.** If you ask, a debt collector must provide you with certain information about the debt you believe was incurred in your name by an identity thief – like the name of the creditor and the amount of the debt.



**5. If you believe information in your file results from identity theft, you have the right to ask that a consumer reporting agency block that information from your file.** An identity thief may run up bills in your name and not pay them. Information about the unpaid bills may appear on your consumer report. Should you decide to ask a consumer reporting agency to block the reporting of this information, you must identify the information to block, and provide the consumer reporting agency with proof of your identity and a copy of your identity theft report. The consumer reporting agency can refuse or cancel your request for a block if, for example, you don't provide the necessary documentation, or where the block results from an error or a material misrepresentation of fact made by you. If the agency declines or rescinds the block, it must notify you. Once a debt resulting from identity theft has been blocked, a person or business with notice of the block may not sell, transfer, or place the debt for collection.

**6. You also may prevent businesses from reporting information about you to consumer reporting agencies if you believe the information is a result of identity theft.** To do so, you must send your request to the address specified by the business that reports the information to the consumer reporting agency. The business will expect you to identify what information you do not want reported and to provide an identity theft report.

**7. The following FCRA right applies with respect to nationwide consumer reporting agencies:**

#### **CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE**

**You have a right to place a “security freeze” on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization.**

The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

To learn more about identity theft and how to deal with its consequences, visit [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore), or write to the Consumer Financial Protection Bureau. You may have additional rights under state law. For more information, contact your local consumer protection agency or your state Attorney General.

In addition to the new rights and procedures to help consumers deal with the effects of identity theft, the FCRA has many other important consumer protections. They are described in more detail at [www.consumerfinance.gov/learnmore](http://www.consumerfinance.gov/learnmore).

**PHASE 2**  
**FOR SECURITY SCREENING PURPOSES**

**APPLICATION FOR A NON-EMPLOYEE, SECURITY CLEARANCE ELIGIBILITY DETERMINATION  
BY MY EMPLOYER'S CLIENT FOR CERTAIN RESTRICTED/LIMITED ACCESS TO  
MY EMPLOYER'S CLIENT'S CUSTOMERS, FACILITIES AND CONSTRUCTION  
SITES; AND OTHER INSTRUCTIONS, WAIVERS AND AGREEMENTS BY ME**

1. I request, authorize, direct and instruct my employer (hereinafter referred to as "my employer") to deliver to my employer's client, and/or my employer's client's agents, any and all personal information that my employer now has, and later comes into possession of, regarding my criminal history, or lack thereof; driving record; drug screenings; workman comp claims; truncated social security number, addresses and date of birth verifications; judgments; public records; social records; private records, and evictions and etc., in order that my employer's client may make a separate, non-employee determination regarding my eligibility for a security clearance for certain restricted/limited access to my employer's client's customers, facilities and construction sites based on my employer's client's separate, non-employment security clearance criteria.
2. I understand that my employer's client, and my employer's client's agents, are not my employers or prospective employers, and they owe me no duties whatsoever as an employer.
3. I understand that my employer has a contract with their client, to provide sales, marketing, collections, installation, and other services of various types, which services I may be providing in some way to my employer's client's customers on behalf of my employer and that I may need access to my employer's client's customers, facilities and/or construction sites to do so. I also understand that to have access to my employer's client's customers, facilities and/or construction sites that such access necessitates a separate security clearance regarding me conducted by my employer or its agents.

I understand that this security clearance of my employer's client is similar in nature as if my client had a contract with the government. The government would require that I also go through the government separate security clearance vetting before I could have access to the government property. The government would not be my employer in such a situation just as my employer's client is not my employer in this situation.

4. I understand and agree that my employer's client's non-employee, security clearance eligibility determination is separate from my employer's in-house employment hiring criteria or employee screening process and that only my employer makes decisions about my employment. I understand that to gain access to my employer's client's customers, facilities and/or construction sites I must pass my employer's client's security clearance criteria, which eligibility determination is separate from my employer's decision about my employment. I understand that any decision made about qualifying for such a security clearance for purposes of access to my employer's client's customers, facilities or

construction sites is made solely by my employer's client and no one else. I also understand that only my employer's client makes the rules and decisions about their own security clearance for access and NOT my employer.

5. I understand that if I pass my employer's client's security clearance criteria, I may be issued a security clearance card granting me specific and restricted access to my employer's client's customers, facilities and/or constructions sites. I also understand and agree that a security clearance decision by my employer's client is not subject to any individualized assessment as I understand and agree that my employer's client and its agents are not my employer, but rather, my employer is an independent contractor for its client who is demanding a separate non-pre-employment security clearance.
6. I further request, authorize, direct, and instruct any and all governmental agencies, private entities, companies and/or individuals to release any and all information relating to me to my employer's client, or its agents, in an effort for my employer's client, or its agents to perform a determination for my eligibility for my employer's client's security clearance.
7. I understand that my employer's client, and/or its agents, may need a copy of my social security card, driver license and/or other personal documentation, including, but not limited to, police reports, plea agreements, probation or parole information and/or other information to complete its determination for eligibility for my employer's client's security clearance, and I agree to fully cooperate with the my employer's client, and its agents, and to assist them to complete my eligibility determination. I understand that even if I do cooperate that my employer's client, and its agents, have no duty to complete an investigation(s) or determination for eligibility for me for my employer's client's security clearance.
8. I understand that my employer's client, and its agents, have no duty to me whatsoever to complete or to issue an eligibility determination for a security clearance, for any reason or no reason, and without recourse to me.
9. I hereby release my employer from any liability whatsoever for releasing my personal information to its client, or its clients' agents, as I have specifically instructed my employer to release all of my personal information that they may ever receive about me and from any source.
10. I agree, desire, request and instruct that any claim, dispute or controversy linked to, arising out of, or in any way related to, or associated with: my employer releasing my personal information to my employer's client, or its agents; my employer's client, or its agents, making any determination or adjudication of eligibility for a security clearance; failure of my employer's client, or its agents, to complete my eligibility determination or adjudication for employer's clients security clearance; my employer's clients, or its agents, making a determination or adjudication of not issuing me security clearance; the investigation performed or the consumer reports prepared by the credit reporting agency; any alleged or actual violation of federal, state, county or local statute, act, rule, law or ordinance by my employer, my employer's client's, or its agents, or the credit reporting agency that performed the original background investigations and prepared the consumer report delivered to my employer; any alleged or actual violation of ANY federal, state, county, or local statute, act, rule, law or ordinance, or; any other reason whatsoever related to or arising out of anything to do with a security clearance, all of

which issues shall all be decided solely and only by arbitration and NOT through any federal, state, county or local court system.

11. I warrant that my employer has provided me with a copy of its client's security clearance criteria upon which its client, or its client's agents, may determine or adjudicate my eligibility for my employer's client's security clearance. I have read and understand the applicable security clearance criteria of my employer's client and agree with the eligibility determination factors and that said factors and eligibility in not my employer's employment screening criteria.
12. I specifically waive any rights to join any claim(s) with claims of others in any form of class action or any similar procedure regarding any claim, dispute or controversy linked to, arising out of, or in any way related to, or associated with: my employer releasing my personal information to my employer's client, or its agents; my employer's client, or its agents, making any determination or adjudication of eligibility for a security clearance; failure of my employer's client, or its agents, to complete my eligibility determination or adjudication for employer's clients security clearance; my employer's clients, or its agents, making a determination or adjudication of not issuing me security clearance; the investigation performed or the consumer reports prepared by the credit reporting agency; any alleged or actual violation of federal, state, county or local statute, act, rule, law or ordinance by my employer, my employer's client's, or its agents, or the credit reporting agency that performed the original background investigations and prepared the consumer report delivered to my employer; any alleged or actual violation of ANY federal, state, county, or local statute, act, rule, law or ordinance, or; any other reason whatsoever related to or arising out of anything to do with a security clearance.
13. Furthermore, I specifically agree that for any claim, dispute or controversy linked to, arising out of, or in any way related to, or associated with any scenario or type of claim as set forth in paragraphs 10 & 12 above, that I waive any and all rights to a jury trial or to a trial by a judge.
14. I agree that any claim, dispute, or controversy of any kind whatsoever linked to, related to, arising out of or regarding any scenario or type of action as set forth in paragraphs 10 or 12 above shall be brought through arbitration pursuant to the American Arbitration Association rules. Additionally, I specifically waive any and all rights to appeal of the arbiter's or arbiters' decision in arbitration. I further specifically agree that Mesa, Arizona, is the exclusive venue and jurisdiction for arbitration. Lastly, notwithstanding any rules to the contrary, I agree that each party shall be responsible for their own attorney fees and costs for any claims.
15. I agree that any cause of action against my employer, my employer's client, or my employer's client's agents, must be filed within one calendar year from the time any claim or cause of action, or any such claim shall forever be barred.
16. Notwithstanding, if any statute, act, rule, regulation, or other applicable law or ordinance prohibits any clause, provision, or sentence in this agreement, then that applicable statute, act, regulation, law, or ordinance shall govern any prohibited clause, provision or sentence and any offending clause, provision or sentence in this agreement shall be disregarded and excluded and shall not constitute a violation thereof and the remainder of the agreement shall be fully enforceable. The remainder of the agreement not considered to violate any such statute, act, rule, regulation, law, or ordinance shall remain in full force.



17. If I qualify for a Phase 2 non-pre-employment access security clearance for my employer's client I agree:

- To wear the security clearance badge in plain view whenever I am in the scope of my employment with my employer when in any way servicing a customer of my employer's client, or when I am in or on a facility or construction site of my employer's client.
- To allow anyone to scan the security clearance badge, including all of my employer's client's representatives.
- That the security clearance badge is the property of my employer's client and that I will report a lost or stolen badge to my employer immediately.
- That I must and will return the badge to my employer immediately upon termination from my employer for any reason, and that failure to do so is considered theft and may affect my future ability to obtain another non-employment security clearance from my employer's client.
- To contact my employer or my employer's client directly if I suspect any fraud or misuse of my badge or anyone else's badge.
- That my employer's client's security clearance badge may be transferred but must first be returned to my original employer prior to issuance of a new badge for a new employer.
- My employer and/or my employer's client retain the absolute right to deactivate and retrieve the security clearance badge at any time, for any reason.

18. I certify and warrant that all the information contained in this request, authorization, directive, and instructions in this document are true and correct. I agree that if a security clearance is granted to me that it may be terminated at any time for any reason, or no reason, by my employer or my employer's client.

**I have fully read this entire document, understand the content, and I agree to all of its contents. If I had any questions, I have consulted my employer.**

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**Security Clearance Applicant Signature**

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**Date**

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**Printed Name**

# VITEK SOLUTIONS, INC

816 Horan Dr, Fenton MO 63026 \* 636-600-1700 \* Fax 636-600-1705

I \_\_\_\_\_ understand as a condition of employment with Vitek Solutions, Inc. a pre-employment drug screen/physical and criminal background check are required. Applicant agrees that should the applicant fail to pass the drug screen/physical and criminal background check the applicant will be responsible to reimburse Vitek Solutions, Inc., 50% of the cost of said test, (\$48.25 for the Drug Screen/Physical and \$40.23 for the criminal background check). I further understand that these tests can and will be used in determining the status of my employment with Vitek Solutions, Inc. I further hold harmless Vitek Solutions, Inc from any responsibility and /or liability arising from the above tests, and will not institute any litigation concerning the above test.

Applicant agrees that should he or she fail to report to work after being hired, quit by his/her own decision, or be terminated within three months (90 days), the employee will pay the full cost (\$96.50 and \$ 80.45) of all drug screen/physical and criminal background checks while in the probationary period (90 days).

Applicant also acknowledges by signing below that all new employees are considered probationary for a period of three months (90 days), during which time employee may be terminated without cause.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Date of Hire \_\_\_\_\_

# INTERVIEW CHECKLIST

Applicant Name: \_\_\_\_\_

Interviewer Initials		Applicant Initials
_____	Discussed Tools required and cost involved. Applicant is aware that he/she may purchase tools outside of Vitek as long as they meet OSHA safety guidelines and company safety guidelines/policy standards.	_____
_____	Discussed uniform requirements and cost involved.	_____
_____	Are you currently attending a Trade school/College? <b>Yes or NO</b> If so, please be aware that accepting employment at Vitek Solutions, you agree to NOT allow this to interfere with your daily work/work schedule at Vitek Solutions.	_____
_____	Discussed cell phone requirements for the Samsung Galaxy S8, S9, S10e, or S20FE and cost involved.	_____
_____	Must be able to pass pre-employment background check, motor vehicle record check, drug test, job related physical, and approval from management.	_____
_____	Linemen Boots/Class E Hard Hat/MO Class E Driver's License or greater. Applicant is aware that he/she will be responsible for purchasing Linemen boots, a Class E hard hat and will obtain a MO Class E Driver's License. Applicable items must meet OSHA regulations and <b>ALL</b> aforementioned items are required on first day of employment.	_____
_____	Applicant is aware that the technician position is a non-traditional position that may require the employee to work 7 days a week, at irregular hours and may include weekends and holidays.	_____
_____	Get Photo	_____

\_\_\_\_\_  
APPLICANT SIGNATURE

DATE: \_\_\_\_\_

\_\_\_\_\_  
INTERVIEWER SIGNATURE

DATE: \_\_\_\_\_