

Disclosure and written authorization for a background report

I understand that 4 Corner Resources may obtain consumer credit reports / or consumer reports and/or investigative reports about me from a consumer reporting agency. The information contained in the report(s) may be used in whole or in part for the purpose of evaluating me for employment, promotion, reassignment or retention as an employee.

I understand the consumer reporting agency may conduct an investigation which may include the following types of information: credit information, information regarding my character, general reputation, personal characteristics, mode of living, judgments, lien, convictions, past employment problems, education verification and history, job verification and history, driving records, personal interviews with other individuals, civil records, wants and warrants, verification of references and Social Security traces.

I understand that such information may be obtained by direct or indirect contact from former employers, schools, financial institutions, landlords, and public agencies and through personal interviews with my neighbors, friends, and associates, acquaintances, or other persons who may have such knowledge and I authorize these persons/entities to provide such information and records pertaining to me to the consumer reporting agency making these inquiries pursuant to this Authorization.

I acknowledge that I have been provided a description in writing of my rights under the federal Fair Credit Reporting Act. I understand that before any adverse action is taken based on information in any report received by 4 Corner Resources, LLC that I will be provided a copy of the report.

I hereby authorize, upon request and confirmation, 4 Corner Resources to release and disclose access to background records and documents pertaining to me. I expressly waive the privilege of confidentiality of the requested records, documents, and information with respect to the requested entity. This authorization shall not expire after a particular period but rather shall remain valid and in effect unless and until canceled in writing by me.

My signature below signifies that 1) I have reviewed this document carefully; 2) I understand its contents; 3) I authorize 4 Corner Resources, LLC to obtain the report(s) and information identified in this document from a consumer reporting agency; 4) I understand that this consent is valid for the duration of my employment with 4 Corner Resources, LLC and 5) a copy of this authorization is as valid as the original.

Applicant/Employee Name (Plea	se Print)			
Other Names Used				
Applicant/Employee Address				
	(Number, Full Nar	me of Street)		
City	_State	Ziŋ	p	
Telephone	Social Se	curity Number		
Date of Birth (for identification o	only)/			
Email Address		•		
Applicant/Employee Signature		Da	ite /	/

EMPLOYMENT

Please provide the contact information for the past 5 years of employment (if you received your past employment through a staffing agency, please provide the staffing agency information below):

Name of Employer	
Address (City/State)	
Phone Number	
Dates of Service(Month/Year)	
Position Held	
Supervisor	
Name of Employer	
Address (City/State)	
Phone Number	
Dates of Service(Month/Year)	
Position Held	
Supervisor	
Name of Employer	
Address (City/State)	
Phone Number	
Dates of Service(Month/Year)	
Position Held	
Supervisor	
EDUCATION Provide the information of the highest level of Education completed:	
Name of institution	
Location: City and State	
Dates of Attendance (Month/Year)	
Name used while attending	
Major	
Degree or Diploma received	