## **DISCLOSURE**

Please be advised that we and/or our agent HRPLUS, may obtain consumer reports and/or investigative consumer reports about you for employment purposes, including without limitation, for the purposes of evaluating you for employment, promotion, reassignment and retention as an employee, at any time prior to or during your employment and without giving you any additional notice. Pursuant to the Fair Credit Reporting Act (FCRA), consumer reports and/or investigative consumer reports (reference checks) may include, without limitation, information about your character, general reputation, personal characteristics and mode of living, whichever are applicable, as well as salary history, reason for termination, eligibility for rehire and any disciplinary actions taken against you. An investigative consumer report may involve personal interviews with sources, including without limitation, employers, supervisors, coworkers, clients, friends, associates and neighbors.

The FCRA provides you with the right to request from us, in writing within a reasonable amount of time, a disclosure of the nature and the scope of any investigative consumer report (reference check). The disclosure shall be made in writing and mailed, or otherwise delivered, to you no later than 5 days after the date on which your request is received or 5 days after the date on which the report was first requested, whichever is later. You may also request a "Summary of Your Consumer Rights under the FCRA" as prepared by the Federal Trade Commission. These can be obtained at no charge.

To obtain a disclosure of the nature and the scope of any investigative consumer report (reference check), please provide us a written request. To obtain a "Summary of Your Consumer Rights", simply let us know that you would like a copy.

## AUTHORIZATION/CONSENT & RELEASE

I, the undersigned, certify that all the information provided as part of my application for employment is true and complete to the best of my knowledge. I acknowledge that any false or misleading information in my application materials or interview may result in denial of employment or termination, if hired and that any personal information requested, including date of birth, is requested solely for identification purposes.

I hereby authorize National Electrical Manufacturers Association ("Company") and/or its agent HRPLUS, to prepare consumer reports and/or investigative consumer reports (reference checks) about me for employment purposes, including without limitation, for the purpose of evaluating me for employment, promotion, reassignment and retention as an employee, at any time prior to or during my employment and without giving me any additional notice.

I FURTHER AUTHORIZE ALL PERSONS, EMPLOYERS, SUPERVISORS, COWORKERS, SCHOOLS, COMPANIES, CORPORATIONS, ORGANIZATIONS, CREDIT BUREAUS, COURTS AND ANY GOVERNMENTAL, LAW ENFORCEMENT, LICENSING AND RECORD-KEEPING AGENCIES, AND ANY OTHER SOURCE OF INFORMATION TO PROVIDE ALL INFORMATION REQUESTED WITH RESPECT TO MY BACKGROUND, INCLUDING ANY CRIMINAL RECORDS, TO COMPANY AND/OR ITS AGENT HRPLUS.

I hereby voluntarily and knowingly release and discharge Company, HRPLUS and any source of information from any and all claims, damages, losses, liabilities, costs and expenses arising from or relating to the retrieving, preparing and reporting of any information, including without limitation any inaccurate or incomplete information, to the fullest extent permitted by law.

I certify that I have read and understand this entire document, including the above DISCLOSURE, and I agree that a copy of this document is as valid as the original.

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Applicant's Printed Name	Applicant's Signature	Date

## **Applicant Authorization/Consent & Release**



We truly welcome your application with National Electrical Manufacturers Association or one of its divisions ("Company"). Your signature below certifies that all the information provided as part of your application for employment, including without limitation, the information below, is true and complete to the best of your knowledge and that you have reviewed this entire document and a separate document entitled, "Disclosure." Your signature below acknowledges that any false or misleading information in your application materials or interview may result in denial of employment or termination, if hired, and that any personal information

requested below, including date of birth, is requested solely for identification purposes. Your signature below also authorizes the preparation of consumer reports and/or investigative consumer reports on you for employment purposes, including

	without limitation, for the purpose of evaluating you for employment, promotion,						
For prompt processing, use all	reassignment and retention as an employee, at any time prior to or during your employment and without giving you any further notice.						
UPPERCASE and avoid touching the	Your signature further authorizes all persons, employers, supervisors, coworkers, schools,						
sides of the boxes:	companies, corporations, organizations, credit bureaus, courts and any governmental, law enforcement, licensing and record-keeping agencies, and any other source of information						
JONES45678	to provide all information requested concerning your background, including any criminal records, to the Company and/or its agent HRPLUS.						
	Your signature further voluntarily and knowingly releases Company, HRPLUS and any source of information from any and all claims, damages, losses, liabilities, costs and						
Social Security Number:	expenses arising from or relating to the retrieving, preparing and reporting of any						
	information, including without limitation any inaccurate or incomplete information, to the fullest extent permitted by law.						
Date of Birth:	Your signature certifies that you have read and understood this entire document and you agree that a copy of this document is as valid as the original.						
Home Telephone Number:	$\mathbf{X}$						
	Signature Today's date						
Last Name (as it appears on Driver's License):							
First Name:	Middle Name:						
Former Name and/or Other Names Used:	Date of Name Change:						
Driver's License Number (Omit Spaces and Dashes	): State: License Expiration Date:						
Current Street Address (NOT P.O. Box):	<del></del>						
Current City:							
Current State: Zip Code: How Long	Current County (NOT Country):						
Years	Months						
Please list the City, State and Zip Code of all other	addresses you have lived at in the past 7 years.						
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## Employment/Reference/Education Information PLEASE PRINT NEATLY AND USE AN INK PEN. EXPECT EVERY PERSON TO BE CONTACTED.

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