ACKNOWLEDGMENT AND AUTHORIZATION FOR BACKGROUND CHECK

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 both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by [Client] ("the Company") at any time after receipt of this authorization and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, 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 RiskAware LLC, 1776 Mentor Ave., Suite 315, Norwood, OH 45212, 877-552-8907, http://riskaware.com and/or the Company itself. I agree that a facsimile ("fax").

electror	nic or photographic copy of this Authorization shall be as valid as the original.
Compan furnished the Com	rk applicants only: Upon request, you will be informed whether or not a consumer report was requested by the y, and if such report was requested, informed of the name and address of the consumer reporting agency that d the report. You have the right to inspect and receive a copy of any investigative consumer report requested by pany by contacting the consumer reporting agency identified above directly. By signing below, you acknowledge of Article 23-A of the New York Correction Law
	gton State applicants only: You also have the right to request from the consumer reporting agency a written y of your rights and remedies under the Washington Fair Credit Reporting Act.
	ota and Oklahoma applicants only: Please check this box if you would like to receive a copy of a consumer one is obtained by the Company. □
	ia applicants only: Under California Civil Code section 1786.22, you are entitled to find out what is in the CRA's ou with proper identification, as follows:
•	In person, by visual inspection of your file during normal business hours and on reasonable notice. You also ma request a copy of the information in person. The CRA may not charge you more than the actual copying costs for providing you with a copy of your file.

- A summary of all information contained in the CRA file on you that is required to be provided by the California Civil Code will be provided to you via telephone, if you have made a written request, with proper identification, for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or charged directly to you.
- By requesting a copy be sent to a specified addressee by certified mail. CRAs complying with requests for certified mailings shall not be liable for disclosures to third parties caused by mishandling of mail after such mailings leave the CRAs.

"Proper Identification" includes documents such as a valid driver's license, social security account number, military identification card, and credit cards. Only if you cannot identify yourself with such information may the CRA require additional information concerning your employment and personal or family history in order to verify your identity. The CRA will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information contained in files maintained on you. This written explanation will be provided whenever a file is provided to you for visual inspection. You may be accompanied by one other person of your choosing, who must furnish reasonable identification. A CRA may require you to furnish a written statement granting permission to the CRA to discuss your file in such person's presence.

Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report an ocharge if one is obtained by the Company whenever you have a right to receive such a copy under California law. \Box				
no charge ii one is obtained	by the Company whenever you have a right to receive such a copy under California law.			
Signature:	Date:			
	[PAGE 1 OF 1-END OF DOCUMENT]			

APPLICANT INFORMATION FOR BACKGROUND CHECK

Last Name	First	Middle
Other Names/Alias		
Social Security*#		Date of Birth*
Driver's License#	State of D	river's License**
Present Address		Phone Number
City/State/Zip		
Former Employer #1	Position	Dates ofEmployment
Address	Phone Number	Contact
Former Employer #2	Position	Dates of Employment
Address	Phone Number	Contact
Former Employer #3	Position	Dates ofEmployment
Address	Phone Number	Contact
HighestDegreeEarned	Major	
Date Degree Earned	School Attended (please include ca	ampus location)

^{*}This information will be used for background screening purposes only and will not be used as hiring criteria.