INTELIFI
SCREENING TECHNOLOGY

Pre-Employment Background Check Disclosure & Authorization Form

In connection with my application for employment (including contract for services or volunteer services) or tenancy with _____. These consumer reports (investigative consumer reports in California) may include the following types of information: names and dates of previous employers, salary, work experience, education, accidents, licensure, credit (except California), etc. I further understand that such reports may contain public record information such as, but not limited to: my driving record, workers' compensation claims, judgments, bankruptcy proceedings, criminal records, etc., from federal, state and other agencies which maintain such records. In addition, investigative consumer reports as defined by the federal Fair Credit Reporting Act, gathered from personal interviews with former employers and other past or current associates of mine to gather information regarding my work performance, character, general reputation and personal characteristics may be obtained.

I have the right to make a request to the consumer-reporting agency: INTELIFI, Inc. 8730 Wilshire Blvd, Suite 412, Beverly Hills, California 90211; telephone (888) 409-1819 ("Agency") , upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including the sources of information and the agency, on our behalf, will provide a complete and accurate disclosure of the nature and scope of the investigation covered by the investigative consumer report(s); and the recipients of any reports on me which the agency has previously furnished within the two year period for employment requests, and one year for other purposes preceding my request (California three years). I hereby consent to your obtaining the above information from the agency. You may view our privacy policy at our website: www.intelifi.com . I hereby authorize procurement of consumer report(s) and investigative consumer report(s).If hired (or contracted), this authorization shall remain on file and shall serve as ongoing authorization for you to procure consumer reports at any time during my employment (or contract) period.

☐ California, Minnesota and Oklahoma Applicants: Check box if you request a copy of your consumer report

Notice to California Residents: You have the right under Section 1786.22 of the California Civil Code to contact the Agency during reasonable hours (9:00 a.m. to 5:00 p.m. (PTZ) Monday through Friday) to obtain all information in your file for your review. You may obtain such information as follows: 1) In person at the Agency's offices, which address is listed above. You can have someone accompany you to the Agency's offices. Agency may require this third party to present reasonable identification. You may be required at the time of such visit to sign an authorization for Agency to disclose to or discuss your information with this third party; 2) By certified mail, if you have previously provided identification in a written request that your file be sent to you or to a third party identified by you; 3) By telephone, if you have previously provided proper identification in writing to Agency; and 4) Agency has trained personnel to explain any information in your file to you and if the file contains any information that is coded, such will be explained to you.

Notice to New York Residents: I acknowledge receiving a copy of Article 23A of the NY Correction Law

I AUTHORIZE, WITHOUT RESERVATION, ANY PARTY OR AGENCY CONTACTED BY THE CONSUMER REPORTING AGENCY TO FURNISH THE ABOVE-MENTIONED INFORMATION. I acknowledge that I have been provided a copy of consumer's rights under the Fair Credit Reporting Act.

_____ _____-_____-_____ _____/_____/_____
Print Name Social Security # Date of Birth

_____ _____/_____/_____
Applicant's Signature Date

_____ _____
Email (required in order to receive legal notices) Any other names used