

## THE LASALLE NETWORK

### DISCLOSURE AND AUTHORIZATION FORM

THE LASALLE NETWORK (the "Company") may request background information about you from FERRET BACKGROUND CHECK (FBC) or HIRE IMAGE LLC, a consumer-reporting agency, in connection with your employment application and for employment purposes. This information may be obtained in the form of consumer reports and/or investigative consumer reports. These reports may be obtained at any time after receipt of your authorization and, if you are hired by the Company, throughout your employment.

FBC will obtain the reports for the Company. FBC can be contacted at 877-371-0007. The reports may contain information bearing on your character, general reputation, personal characteristics, mode of living and credit standing. The types of information that may be obtained include, but are not limited to: social security number verifications; credit reports; criminal records checks; public court records checks; driving records checks; educational records checks; employment verifications; personal and professional references checks; licensing and certification records checks; drug testing results; etc. The information contained in the reports will be obtained from private and public record sources, including, as appropriate, personal interviews with sources, such as neighbors, friends and associates.

A Summary of your rights under the Fair Credit Reporting Act is also being provided to you.

I have carefully read and understand this Disclosure and Authorization form and the attached summary of rights under the Fair Credit Reporting Act. By my signature below, I consent to the release of consumer reports and investigative consumer reports prepared by a consumer reporting agency, such as FBC, to the Company and its designated representatives and agents. I understand that if the Company hires me, my consent will apply, and the Company may obtain reports, throughout my employment.

I also understand that information contained in my job application or otherwise disclosed by me before or during my employment, if any, may be used for the purpose of obtaining consumer reports and/or investigative consumer reports.

By my signature below, I authorize law enforcement agencies, learning institutions (including public and private schools and universities), information service bureaus, credit bureaus, record/data repositories, courts (federal, state and local), motor vehicle records agencies, my past or present employers, the military, and other individuals and sources to furnish any and all information on me that is requested by the consumer reporting agency.

By my signature below, I certify the information I provided on this form is true and correct. I agree that this Disclosure and Authorization form in original, faxed, photocopied or electronic (including electronically signed) form, will be valid for any reports that may be requested by or on behalf of the Company.

► **For California, Minnesota & Oklahoma residents Only:** Please check here if you wish to receive a copy of your background report YES

► **For California residents only:** Pursuant to California Civil Code § 1786.22, you may view the file maintained on you by Ferret Background Check (FBC). You may also obtain a copy of this file, upon submitting proper identification and paying applicable duplication cost, **by submitting a request by mail to FBC, P.O. Box 661, Highland Park, IL 60035**, by appearing at FBC's Office in person, during normal business hours and on reasonable notice, or you may also receive a summary of the file by telephone after submitting a written request. FBC has personnel available to explain your file and any coded information contained in your file. If you appear in person, you may be accompanied by one other person, providing that person furnishes proper identification. FBC is located at 210 Skokie Valley Rd., Highland Park, IL 60035 and may be contacted at 877-371-0007.

**PLEASE PRINT**

Applicant/EmployeeName: \_\_\_\_\_  
(Last) (First) (Middle initial)

Previous Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

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

Previous Street Address: \_\_\_\_\_

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

Date of Birth: (month) (day) (year) \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Driver's License or State ID Number: \_\_\_\_\_ State: \_\_\_\_\_

**The information requested on this form is for screening and verification of information only and has no role in the selection process.**

Applicant/Employee Signature: \_\_\_\_\_ Date \_\_\_\_\_