BERCHTOLD EQUIPMENT COMPANY BACKGROUND DISCLOSURE, AUTHORIZATION & REQUEST FORM

I understand that a consumer report and/or investigative consumer report, which may include information regarding my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics or mode of living will be requested and may be used in whole or part for the purpose of evaluating me for employment, promotion, reassignment, or retention as an employee. Such report(s) may include interviews of others concerning such matters as prior employment, capabilities, and qualifications, or concerning employment problems, should any arise, such as sexual harassment, workplace violence, theft and workers' compensation fraud.

The investigative consumer reporting agency preparing the report(s) is Pre-Employment Profiles, contact information provided below. Their files are available for review in person, by certified mail or telephonically with proper identification. If any adverse decision is made with regard to my application or employment (if any) based entirely or in part on the information contained in the consumer report and/or investigative consumer report, I understand that I will be notified as to the basis of that decision and given a copy of the report as well as a summary of my applicable rights. I have provided complete and truthful information to this perspective employer, and fully understand that any misrepresentation or material omissions concerning the information provided will be ground for denying my application, withdrawing any offer of employment, or immediate discharge.

By my signature below, I hereby authorize a consumer report and/or an investigative consumer report to be obtained and consent to the release of a consumer report to this perspective employer. I also acknowledge receipt of "A Summary of Your Rights Under the Fair Credit Reporting Act". A copy of this document is the same as the original.

Please print legibly. Incomplete Full Legal Name:				
First		Middle	Last	
Aliases/Maiden Names:				
Current Address/City/State/	Zip:			
Previous Addresses, includ	ing City & Zip code,	for past 7 year	s. Use additional p	pages if necessary.
Driver's License/ID Number:			State Issued:	Contact Phone:
Month & Date of Birth:		Soc	ial Security Numbe	r:
Special Training/University/	College Attended, [Degrees. <u>Use a</u>	dditional pages if	necessary.
Schools	City/State	Degree/Cer	tifications Received	d Years Attended or Conferred
I understand that I can be p <u>Please provide me</u> Email address:	with a copy of this r	eport by or em	ail(at completion) n	nail(3-5 business days from completion)
☐ <u>I do not desire to re</u>	ceive a copy of this	report at this ti	<u>me.</u>	
		Applicant's Si		Date
		Backg	round Level Requeste	d: 1 2 2 + Credit Credit only Executive