



DISCLOSURE FOR CONSUMER REPORT - NO CREDIT

Pragmatic Systems International Corporation may obtain information about you from a third-party consumer reporting agency for employment purposes.

ACKNOWLEDGMENT AND AUTHORIZATION FOR CONSUMER REPORT

I acknowledge receipt of the separate documents entitled DISCLOSURE REGARDING BACKGROUND CHECK, DISCLOSURE FOR INVESTIGATIVE CONSUMER REPORT, if applicable, A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and OTHER STATE LAW NOTICES and certify that I have read and understand each of those documents. I hereby authorize the obtaining of “consumer reports” and/or “investigative consumer reports” by Pragmatic Systems International Corporation 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 AccurateNow, 7515 Irvine Center Dr., Irvine, CA 92618, 866-693-1764, <https://accuratenow.com/> and/or Pragmatic Systems International Corporation. This information may include, but not be limited to, information regarding my criminal history, social security verification, motor vehicle records (“driving records”), verification of my education or employment history, or other background information. I agree that a facsimile (“fax”), electronic or photographic copy of this Authorization shall be as valid as the original.

By signing below, I acknowledge receipt of this Disclosure for Consumer Report and certify that I have read and understand this document.

Signature: _____

Date: _____

IDENTIFYING INFORMATION FOR CONSUMER REPORTING AGENCY

Applicant Name (First Middle Last)	Current Address:
Other Name(s)Used - (Maiden):	City: State: Zip:
Social Security Number:	Former Address:(1)
Sex: Race:	City: State: Zip:
Driver's License Number: State of Issue:	Former Address:(2)
Month, Day and Year of Birth*:	City: State: Zip:

Without this information, we will be unable to properly identify you in the event we find adverse information during the course of our background investigation.

Signature: _____ **Date:** _____