

### AUTHORIZATION FOR BACKGROUND CHECKS

It is the policy and practice of our Fishing Company to conduct background checks on all applicants for employment with the company. These background checks are mandatory for all applicants, and are a required condition for an individual being considered as a viable applicant for employment with our Fishing Company.

The company has arranged with a risk management services company to conduct background checks on its employment applicants. The investigation entity will generate a written report documenting the background checks conducted for each applicant, which will be used to determine whether the company wishes to further consider the applicant for employment with our Fishing Company.

Our Fishing Company promises not to use any report received from the investigating entity in violation of any applicable federal, state or local equal employment opportunity laws or regulation.

This form is to notify all applicants that background checks will be conducted through a risk management company, and to obtain from each applicant his or her specific authorization to permit the company and the investigating entity to conduct such background checks.

#### THIS FORM MUST BE FILLED OUT COMPLETELY

Name \_\_\_\_\_  
(Last) (First) (Middle)

Please indicate any other names you have used (Including maiden name if applicable) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ City and State of birth \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair Color \_\_\_\_\_ Eye Color \_\_\_\_\_ Race \_\_\_\_\_ Sex \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Drivers License or State ID # \_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor? (Admission of criminal convictions does not automatically disqualify you from employment)

Yes \_\_\_\_\_ No \_\_\_\_\_ if yes please give details \_\_\_\_\_  
Date Crime Location

List below addresses at which you have lived in the past seven years with dates.

From To Address City State Zip

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The undersigned, in connection with an application for employment, hereby authorizes the procurement of an investigative report. This authorizes any law enforcement or judicial agency, corporation, company or others to provide relevant information they may have on the applicant to this investigating entity. This further releases all parties providing information from any and all liabilities or responsibility of doing so. The undersigned hereby acknowledges that they read or have had read to them this authorization and they understand it. A copy of this authorization has the same authority as the original.

\_\_\_\_\_  
Print Name Signature Date