





**Applicant Statement, Acknowledgement and Authorization**

I certify that all information I have provided in order to apply for and secure work with the Employer is true, complete and correct.

I acknowledge that I will comply with all policies, rules and procedures established by the Employer and understand that noncompliance may, at the discretion of the Employer, result in discharge.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the Employer's service, whenever it is discovered.

I hereby authorize, and have been informed by the Employer, that credit history and criminal background checks may be conducted on me as a condition of employment and continued employment. If an adverse employment action is taken against me because of any credit report, the Employer will so advise me and provide the name and address of the consumer reporting agency from which the report was obtained. I understand and agree that if hired, the Employer from time to time may request that subsequent credit history and criminal background checks be conducted without further notification. I further understand that I am obligated to notify the Employer of any criminal convictions that occur during my employment with the Employer.

I understand that the Employer is a drug/alcohol free workplace, and it is the current illegal use of drugs and/or alcohol abuse that prohibits me from being employed should I test positive. As a result of the drug/alcohol free workplace policy, pre-employment testing, post-accident testing Reasonable suspicion and random testing are required for all employees.

I expressly authorize, without reservation, the Employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive and release any and all rights and claims I may have regarding the Employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the Employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the Employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the Employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the Employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the Employer's president.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.**

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement, Acknowledgement and Authorization.

Signature of Applicant \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

# FAIR CREDIT REPORTING ACT CONSUMER DISCLOSURE AND AUTHORIZATION

**Facts You Need to Know:**

In connection with my application for employment with Sutherland Companies "Company" the Company may obtain a consumer report on you, as defined in the Federal Fair Credit Reporting Act, 15 U.S.C. 1681 *et seq.* It may be an "investigative consumer report" that includes information as to your character, general reputation, personal characteristics, and mode of living, whichever are applicable. If the Company obtains an investigative consumer report, you have the right to request disclosure of the nature and scope of the report, which involves personal interviews with sources such as your neighbors, friends, or associates.

The Company may not obtain any consumer report on you for employment purposes/medical staff privileges without your written consent. Also, the Company may not obtain medical information about you without your express consent to the release of medical information. Consent to the release of medical information, is *not* covered by the authorization contained in this document.

**State-specific information:**

- California – If you are a California resident or applying for employment at a location in the State of California, in addition to this disclosure/authorization, please review and complete the "Disclosure and Acknowledgement Concerning Consumer Credit Report or Investigative Consumer Report Obtained for Employment Purposes Pursuant to California Law."
- Minnesota – If you are a Minnesota resident or applying for employment at a location within the State of Minnesota, you have a right to obtain a copy of the consumer report by checking this box.
- Oklahoma – If you are an Oklahoma resident or applying for employment at a location within the State of Oklahoma, you have a right to obtain a copy of the consumer report by checking this box.

**Consent and General Authorization to Obtain Consumer Report**

I hereby authorize the Company, now or at any time while I am employed by the Company, to obtain a consumer report, or an investigative consumer report, on me. This authorization does not authorize the release of medical information.

**7 years residence:**

		Address	From/To
<b>DOB*:</b>	_____	Street Address _____	_____
<b>SS#:</b>	_____	City _____ State _____ Zip _____	
<b>Other Names Used:</b>		Street Address _____	_____
Name	From/To	City _____ State _____ Zip _____	
_____	_____	Street Address _____	_____
_____	_____	City _____ State _____ Zip _____	
_____	_____	Street Address _____	_____
<b>MVR License #</b>	_____	City _____ State _____ Zip _____	
<b>State of Issuance</b>	_____	Street Address _____	_____
		City _____ State _____ Zip _____	

\* This information will be used for purposes of identification only. Federal law prohibits discrimination in employment on the basis of race, color, sex, national origin, religion, age, equal pay or disability. Additionally, New York State law prohibits discrimination in employment on the basis of creed, sexual orientation, military status or marital status.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Applicant's Name Printed