Applicant Investigative Report
Disclosure Statement

The Fair Credit Reporting Act (Public Law 91-588) requires that we advise you that a consumer report, including an investigative consumer report containing information as to your character, general reputation, personal characteristics and mode of living, may be obtained for employment purposes as part of the pre-employment background investigation and at any time during your employment. If a Consumer Reporting Agency is engaged in this investigation, information relevant to the nature and scope of the inquiry if one is made, will be provided to you upon your written request.

If hired, I understand this authorization shall remain on file and shall serve as an ongoing authorization for Horizon to procure consumer reports at any time during my employment period.

Acknowledgement is hereby made that a consumer report will be pulled in connection with the position for which the undersigned is applying.

Please sign to indicate
Receipt of the above disclosure: _____

Authorization & Release

In connection with my application for employment, I understand that information may be requested as to my character, employment, including job performance and work habits, and other personal history. I further understand that you may be requesting information regarding my motor vehicle driving record history, workers' compensation claims, credit and criminal history and other public records. I agree that any false information in support of my application for employment may subject me to dismissal at any time during my employment.

I hereby authorize and release from all liability without reservation any consumer reporting agency, any law enforcement agency, administrator, State/Federal agency, institution, employers, prior or present, insurance company or person gathering or furnishing the above information.

A photocopy or FAX of this authorization may be deemed to be the equivalent of the original.

_____
Printed Name

_____
Address City State Zip County

_____
Date of Birth Social Security Number

_____
Driver's License Number DL Issuing State

_____
Signature Date