



Louisiana Health & Rehabilitation, Inc.

2121 Wooddale Boulevard Baton Rouge, LA 70806

Phone: (225) 231-2490 Fax: (225) 231-2775

www.lahealthandrehab.org

PROFESSIONAL Employment Application

Baton Rouge, LA 70806

Dear Prospective Employee,

Louisiana Health and Rehabilitation is an Equal Opportunity Employer. We make employment decisions based on individuals' qualifications and ability to perform specific job requirements.

Employment with our Company is considered to be "at will," which means either party may terminate the relationship at any time and for any lawful reason.

All applicants must complete an employment application. Louisiana Health and Rehabilitation also requires documentation of either a diploma or high school equivalent. Letters of reference are strongly recommended. Three (3) reference checks will be needed to complete the employment process!

Following our review of all completed applications, we will begin interviewing the most qualified candidates. Those who do not meet our employment requirements, for whatever reason, will remain on file for a 30 day period.

Louisiana Health and Rehabilitation will make conditional offers of employment to those candidates selected during the interview process. The conditional aspect of the job offer depends on the potential employee agreeing to acknowledge our company policies in writing; consenting/ passing all background and reference checks; and finally any other condition that should be met before the candidate may consider him/herself an employee.

In addition to the above the following conditions also apply:

- 1. All applicants MUST BE 18 YEARS OF AGE OR OLDER.
- 2. Applicants must furnish current and accurate information of present/past employers listed on this application.
- 3. Letters of reference are STRONGLY ENCOURAGED to expedite your application.
- 4. Incomplete applications will **NOT** being processed.

We thank you in advance for your interest in pursuing a career with Louisiana Health and Rehabilitation.		
Applicant's Signature	Date	

Soundra Johnson, Chief Executive Officer

Office: (225)231-2490 Fax: (225) 231-2775

LOUISIANA HEALTH AND REHABILITATION 2121 Wooddale Boulevard BATON ROUGE, LA 70806

Phone: (225) 231-2490 Fax: (225) 231-2775

Today's Date:	
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Application for Employment

We are an equal opportunity employer. Applicants are considered for positions without regard to veteran status, uniformed service member status, race, religion, sex, national origin, age, physical or mental disability, genetic information or any other category protected by applicable federal, state, or local laws.

THIS COMPANY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE.

Last	First	Middle	Other Names Used
Last	1 1130	Wildale	Other Names Osea
Present Address:			
Street	Apt./Unit #	City	State Zip code
Telephone:	_	Email address:	
Home	Cell		
Position applying for:			· · · · · · · · · · · · · · · · · · ·
lob Title:		Minimum Acceptab	le Salary:
Type of Employment desired?	☐ Full-time ☐ Part-tim	e	
Type of Employment desired:	Drail-time Drait-tim	e in remp/seasonar	
Available to work overtime?	☐ Yes ☐ No Available S	tart Date	
	•		
Are you legally eligible to work	in the United States? \(\sigma \) Ve	as 🗆 No	
Federal Law requires proof o			employees.)
(
Can you travel if the job require	es if? 🛘 Yes 🗘 No 🔻 Do	you have a valid driver's	license? ☐ Yes ☐ No
Have you previously applied fo	r ampleyment with this Cam	pany? 🗆 Yes 🗆 I	No
nave you previously applied to	r employment with this com	рапут ш тез ш т	NO .
If Yes, when and where d	lid you apply		
	_	_	
	by this Company? ☐ Yes ☐	3 No	

Education	School Name Location (City, State)	Dates attended	Diploma, Degree & Major	Graduated?
High School				
College				
Jr. College/Bus./				
Tech/trade or Post College				
Technology Skills (Lis	st all skills & software application you have experien	ice using		
Microsoft Office?	☐ Yes ☐ No PowerPoint? ☐ Yes ☐] No	Scanner? □	Yes □ No
Copier? ☐ Yes ☐ N	Other Software Database? ☐ Yes ☐ No	List:		
Professional License	<u>s</u>			
Please answer the	following additional questions			
May we contact your current employer? □ Yes □ No			es 🗆 No	
Have you ever applied to or worked for La. Health & Rehabilitation, Inc. before? ☐ Yes ☐ No				es 🗆 No
If yes, please explain (include date)				
If hired, would you have transportation to/from work? ☐ Yes ☐ No				
If hired, would you be able to present evidence of your U.S. citizenship or proof of your legal right to work in the United States?				
If hired, are you willing to submit to and pass a controlled substance test?			es 🗆 No	
Are you able to perform the essential functions of the job for which you are applying, either with/without reasonable accommodation?			es 🗆 No	
If NO, describe the functions that cannot be performed				

(NOTE: La. Health & Rehab, Inc. complies with the ADA and will consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. It is possible that a hire may be testes on skill/agility and may be subject to a medical examination conducted by a medical professional)

PROFESSIONAL EXPERIENCE

Please list the names of your present and/or previous employers in chronological order with present or last employer listed first. Account for all periods of time including any period of unemployment. If self-employed, supply firm name and business references. You may include any verifiable work performed on a volunteer basis, internships, or military service. Your failure to completely respond to each inquiry may disqualify you for consideration from employment.

Em,	plo	yer

Name	Address	Type of Business
Telephone ()		to/
Job Title:	Duties:	
Supervisor's Name:	May we contact? Yes No If No, why	/ not?
Wages: Start Final	Reason for leaving	
What will employer say was the reason you	r employment terminated?	
How much notice did you give when resignii	ng? If none, explain	
Employer		
Name	Address	Type of Business
Telephone ()		to/
Job Title:	Duties:	
Supervisor's Name:	No If No, why	not?
Wages: Start Final	Reason for leaving	
What will employer say was the reason you	r employment terminated?	·.
How much notice did you give when resignii	ng? If none, explain	
Employer		
Name	Address	Type of Business
		,, ,
Name	Dates employed: From/	to/
Name Telephone ()	Dates employed: From/	to/
Name Telephone () Job Title:	Dates employed: From	to
Name Telephone () Job Title: Supervisor's Name: Wages: Start Final	Dates employed: From	to
Name Telephone () Job Title: Supervisor's Name: Wages: Start Final	Dates employed: From	to
Name Telephone () Job Title: Supervisor's Name: Wages: Start Final What will employer say was the reason you	Dates employed: From	to



EMPLOYEE REFERENCE CHECKS

Name of Prospective Employee:	Date:
Please check (X) if this reference is business or profession	nal:
BUSINESS REFERENCE: Business Name: Contact Person: Phone Number:	PROFESSIONAL REFERENCE: (i.e. Teacher, Clergy, Mentor, etc.) Name: Phone Number:
Please check (X) if this reference is business or profession	nal:
BUSINESS REFERENCE: Business Name: Contact Person: Phone Number:	PROFESSIONAL REFERENCE: (i.e. Teacher, Clergy, Mentor, etc.) Name: Phone Number:
Please check (X) if this reference is business or profession	nal:
BUSINESS REFERENCE: Business Name: Contact Person: Phone Number:	PROFESSIONAL REFERENCE: (i.e. Teacher, Clergy, Mentor, etc.) Name: Phone Number:

2017 Louisiana Laws Revised Statutes TITLE 40 - Public Health and Safety RS 40:1203.3 - Refusal to hire or contract; termination of employment; exemption; appeal procedure; waiver

Universal Citation: LA Rev Stat § 40:1203.3 (2016)

§1203.3. Refusal to hire or contract; termination of employment; exemption; appeal procedure; waiver

A. Except as otherwise provided in R.S. 40:1203.2(C), no employer shall hire any licensed ambulance personnel or nonlicensed person when the results of a criminal history check reveal that the licensed ambulance personnel or nonlicensed person has been convicted of any of the following offenses:

(1) R.S. 14:28.1, 30, 30.1, 31, 32.6, 32.7, 32.12, 34, 34.1, 34.7, 35.2, 37, 37.1, 37.4, 38.1, 42, 42.1, 43, 43.1, 43.2, 43.3, 43.5, 44, 44.1, 46.2, 51, 60, 62.1, 64, 64.1, 64.4, 66, 89, 89.1, 93.3, 93.4, 93.5 or distribution or possession with the intent to distribute controlled dangerous substances as listed in Schedules I through V of the Uniform Controlled Dangerous Substances Act.

(2) An attempt or conspiracy to commit any of the offenses listed in Paragraph (1) of this Subsection.

NAME OF OFFENSE	RS	NAME OF OFFENSE
Solicitation for Murder	14:44	Aggravated Kidnapping
First Degree Murder	14:44.1	Second Degree Kidnapping
Second Degree Murder	14:46.2	Human Trafficking
Manslaughter	14:51	Aggravated Arson
First Degree Feticide	14:60	Aggravated Burglary
Second Degree Feticide	14:62.1	Simple Burglary of a Pharmacy
Criminal Assistance to Suicide	14:64	Armed Robbery
Aggravated Battery	14:64.1	First Degree Robbery
Second Degree Battery	14:64.4	Second Degree Robbery
Aggravated Second Degree Battery	14:65	Extortion
Simple Battery of Infirmed	14:67	Theft SEE VERBIAGE BELOW
Aggravated Assault		(Item 3)
Assault by Drive-By Shooting	14:67.21	Theft of Assets of an Aged
Aggravated Assault with a Firearm		Person or Disabled Person SEE
Mingling Harmful Substances		VERBIAGE BELOW – (Item 3)
Aggravated Rape	14:89	Crime Against Nature
Forcible Rape	14:89.1	Aggravated Crime Against Nature
Simple Rape	14:93.3	Cruelty to Persons with Infirmities
Sexual Battery	14:93.4	Exploitation of the Infirmed
Second Degree Sexual Battery	14:93.5	Sexual Battery of the Infirmed
Oral Sexual Battery		
Intentional Exposure to AIDS Virus		LARA DA
	Solicitation for Murder First Degree Murder Second Degree Murder Manslaughter First Degree Feticide Second Degree Feticide Criminal Assistance to Suicide Aggravated Battery Second Degree Battery Aggravated Second Degree Battery Simple Battery of Infirmed Aggravated Assault Assault by Drive-By Shooting Aggravated Assault with a Firearm Mingling Harmful Substances Aggravated Rape Forcible Rape Simple Rape Sexual Battery Second Degree Sexual Battery Oral Sexual Battery	Solicitation for Murder First Degree Murder Second Degree Murder Manslaughter First Degree Feticide Manslaughter First Degree Feticide Second Degree Feticide Criminal Assistance to Suicide Aggravated Battery Second Degree Battery H:664.1 Second Degree Battery Aggravated Second Degree Battery Simple Battery of Infirmed Aggravated Assault Assault by Drive-By Shooting Aggravated Assault with a Firearm Mingling Harmful Substances Aggravated Rape Forcible Rape Forcible Rape Simple Rape Sexual Battery Second Degree Sexual Battery 14:93.5 Oral Sexual Battery

Distribution or possession with the intent to distribute controlled dangerous substances as listed in Schedule 1 through V of the Uniform controlled Dangerous Substance Act.

40:966-A	Penalty for distribution or possession with intent	to distribute narcotic dr	ugs listed in Schedule i
40:967-A	Prohibited acts - Schedule II, penalties	40:970-A	Prohibited acts – Schedule V; penalties
40:968-A	Prohibited acts - Schedule III, penalties	40:971-a	Prohibited acts – All Schedules
40:969-A	Prohibited acts – Schedule IV, penalties		

- (3) The felony offense involving theft, pursuant to R.S. 14:67, or theft of assets of an aged person or person with a disability, pursuant to R.S. 14:67.21 in excess of five hundred dollars or in any case in which the offender has been previously convicted of theft, pursuant to R.S. 14:67, or theft of assets of an aged person or person with a disability, pursuant to R.S. 14:67.21, regardless of the value of the instant theft.
 - (4) An attempt or conspiracy to commit an offense listed in Paragraph (3) of this Subsection.
- B. Additionally, except as otherwise provided in R.S. 40:1203.2(C), no employer who provides care or services to any person under the age of twenty-one shall hire any licensed ambulance personnel or nonlicensed person when the results of the criminal history check reveal that the licensed ambulance personnel or nonlicensed person has been convicted of any of the following offenses:
 - (1) R.S. 14:44.2, 80, 81.2, or 93.
 - (2) An attempt or conspiracy to commit any of the offenses listed in Paragraph (1) of this Subsection.

RS	NAME OF OFFENSE	RS	NAME OF OFFENSE
14:44.2	Aggravated Kidnapping of a Child	14:81.2	Molestation of a Juvenile
14.80	Felony Carnal Knowledge of a Child	14:93	Cruelty to Juvenile

- C. (1) If the results of a criminal history check reveal that a nonlicensed person or any licensed ambulance personnel hired on a temporary basis or any other person who is an employee has been convicted of any of the offenses listed in Subsection A or B of this Section, the employer shall immediately terminate the person's employment.
 - (2) The provisions of this Section shall not apply to a nonlicensed person or licensed ambulance personnel who was working under a waiver granted under the law in effect prior to August 15, 2010, so long as that person continues to be employed for the employer who granted the waiver and the person began employment for the employer prior to August 15, 2010, or a person who has received a pardon of the conviction or has had his conviction expunged.

Theft – Additional Guidelines

Under the law, convictions of theft may be deemed a felony or a misdemeanor depending upon the value placed on the funds, assets or property stolen. The criminal background check may show a conviction at R.S. 14:67 or R.S. 14:67.21 but not specify whether the conviction was a felony or misdemeanor. A felony conviction of theft would bar employment while a single conviction of misdemeanor theft would not. It is incumbent upon the employer to do their due diligence to assure that they follow through to determine what the conviction of theft was for prior to making an offer of employment.

Employment would be barred for any of the following:

- 1. One conviction of felony theft.
- 2. One conviction of theft of assets of an aged person or a person with a disability over \$500
- 3. Any previous conviction of theft that is not a felony.

This means that if an individual already has a conviction of theft of any amount such as a misdemeanor on their record and they are convicted a second time for theft regardless of the amount, they would be **BARRED** from employment.

If a criminal background check shows a conviction at R.S. 14:67.21 and it is unclear what the conviction is for, the employer must determine if the conviction for theft would be one that would bar employment. Ask the person applying for employment to produce additional evidence regarding the conviction.

The addition of criminal convictions of theft that bar employment was signed into law effective June 4, 2014. The law is applicable to all unlicensed persons or ambulance personnel applying for employment on or after June 4, 2014. Employees with a conviction of theft on their record who were working for an employer prior to June 4, 2014 can continue to work for that employer however, if they seek employment with another employer, the new employer would be restricted from hiring them.

Exception to the Law

In previous years, the criminal background law allowed the employer to use discretion and "waive" a conviction that barred employment due to mitigating circumstances at the time the crime was committed. The mitigating circumstances were specified in the law. There are no longer any provisions in the law that allow a employer to use discretion to waive a conviction. The only exception now provided for is as follows:

A nonlicensed person or licensed ambulance personnel who are working under a waiver granted under the law that was in effect prior to **August 15, 2010**, may continue to work so long as that person continues to be employed by the employer who granted the waiver and the person began employment for the employer prior to August 15, 2010.

The provisions of the law that bar employment also do not apply to a person who has received a pardon of the conviction or has had his conviction expunged from his record. Documented court evidence of pardon or expungement should be kept in the employee's personnel file.

INSTRUCTIONS FOR ANSWERING THE NEXT TWO QUESTIONS:

- 1. All applicants: Do not include convictions that were sealed, eradicated, erased, annulled by a court, or expunged, or convictions that resulted in referral to a diversion program.
- 2. Arizona, Colorado, District of Columbia, Illinois, Kansas, Minnesota, Missouri, Montana, Nevada, Rhode Island, South Carolina, and Utah applicants: Do not respond to the second question regarding arrests.
- California applicants: Do not include misdemeanor marijuana-related convictions that are more than two (2) years
 old or misdemeanor convictions for which probation was successfully completed or otherwise discharged and the
 case was judicially dismissed.
- 4. Connecticut applicants: You are not required to disclose the existence of any arrest, criminal charge, or conviction, the records of which have been erased. Criminal records subject to erasure are records pertaining to a finding of delinquency or the fact that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nulled (not prosecuted), a criminal charge for which the person was found not guilty, or a conviction for which the offender received an absolute pardon. Any person whose criminal records have been erased is deemed to have never been arrested within the meaning of the law as it applies to the particular proceedings that have been erased, and may so swear under oath.
- 5. District of Columbia and Washington applicants: Limit any response to the past ten (10) years.
- 6. Hawaii applicants: Do not answer the following two questions.

recognizance pending trial?

- 7. Indiana applicants: Regarding arrests limit your response to pending charges for felonies and class A misdemeanors that are less than one (1) year old.
- 8. Massachusetts applicants: Limit any response regarding misdemeanor convictions to the last five (5) years and to those which were not a first offense for drunkenness, simple assault, speeding, a minor traffic violation or disturbing the peace. Applicants with a sealed record on file with the Massachusetts Commissioner of Probation may answer "No Record" with respect to: 1) all inquiries relating to prior convictions or arrest; 2) misdemeanor convictions older than five (5) years; and 3) first time convictions for simple assault, drunkenness, speeding, minor traffic violations or disturbing the peace.
- 9. Michigan applicants: Regarding arrests, limit your response to felony arrests awaiting conviction or dismissal.
- 10. New York applicants: All pending arrests or criminal accusations must be disclosed. You are not required to disclose arrests or criminal accusations that resulted in criminal actions or proceedings which were terminated in your favor. Do not disclose criminal actions or proceedings that were sealed or classified as youthful offender adjudications. An ex-offender who is denied employment may, upon written request, receive a statement of the reason(s) for denial within thirty (30) days of the applicant's request for such information.
- 11. North Dakota and Oregon applicants: Regarding arrests, limit your response to pending charges that are less than one (1) year old.

12. Utah applicants: Limit any response to felony conviction only. Do not respond to the second question regarding

Have you ever plead guilty or no contest to, or been convicted of any criminal offense other than the applicable exceptions listed above?

Have you ever been arrested for any matters for which you currently are out on bail or on your own

☐ Yes ☐ No

CRIMINAL OFFENSES ONLY: If you answered "YES", to either of the above two questions, please provide the date(s) and explain in accordance with the above instructions so that individual circumstances can be considered		
Criminal convictions or arrests will not automatically disqualify an applicant from a particular job. The Company will consider the nature of the crime, its seriousness, the substantial relation to the position's functions and qualifications, the number of occurrences, the applicant's age at the time of the crime, the time elapsed since the crime, the applicant's entire work and educational history, employment references and recommendations, and the business necessity of any exclusion when required by law.		
Acknowledgement – Please read before signing		
I certify that the foregoing information is true, correct, and complete to the best of my knowledge. I authorize investigation of all statements I have made on this application for employment as may be necessary to arrive at an employment decision.		
I understand that any false, misleading, or incomplete statements I have knowingly provided herein may be cause for disqualification or if employed, dismissal and/or legal action. I understand that this application is not intended to be a contract of employment or a guarantee of promotional opportunities.		
If employed, I understand that such employment is at will and may be terminated by the corporation at any time. The applicant understands that neither this document nor any offer of employment from this employer constitutes an employment contract unless a specific document is executed in writing by the employer and employee jointly. Any oral or written statements to the contrary are hereby expressly disavowed and should not be relied upon. Just as any employee may resign for any reason, the employer may also terminate the employee for any reason.		
As a condition of employment, I accept the principles that the welfare of the organization depends upon the conduct and honesty of its employees and the trust and confidence of the public in general. La. Health & Rehab, Inc. expects honesty, security, and confidentiality from all employees.		
If employed, I agree to inform the management of La. Health & Rehab, Inc., without delay, of any fraud, false entry, substantial error, embezzlement or employee misconduct, which I discover or know to have taken place upon any records, property, or funds of the organization, and to report any transaction or matter that seems damaging to the organization.		
On the FIRST day of employment, I agree to furnish the LHC, Inc., with proof of age, academic credentials, military separations papers, professional certifications, and other such documents as may be required.		
I hereby authorize LHC, Inc. authority to conduct a background investigation and reference checks concerning my past and current activities. I agree and consent to any investigation LHC, Inc. may make, including but not limited to, information as to my personal character, general reputation, former employment, education, driving history, criminal history, and any other information contained in public records or obtainable from former employers or references, personal or business. I also understand various clearances may be required as a condition of employment.		
Date: Signature:		

DISCLOSURE REGARDING CONSUMER REPORTS

LOUISIANA HEALTH & REHAB OPTIONS Will obtain a Background Check

You acknowledge and understand that in connection with your application for employment with LOUISIANA HEALTH & REHAB, OPTIONS INC. (including any independent contract for services) or when deciding whether to modify or continue your ongoing employment, if hired, we may obtain a "consumer report" and/or an "investigative consume report" on you from AccuScreen, a consumer reporting agency, or from any third party, in strict compliance with both state and federal law.

CONSUMER REPORT DEFINED

A consumer report is any communication of information by a consumer reporting agency bearing on your credit worthiness, credit stand, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used for purposes of serving as a factor in establishing your current and/or continuing eligibility for employment purposes. A common term for a consumer report is a "background check report".

INVESTIGATIVE CONSUMER REPORT DEFINED

An investigative consumer report is obtained through personal interviews with individuals who may have knowledge of your character, general reputation, personal characteristics, or mode of living. An investigative consumer report might include, for example, calls to the personal references you provide or conversations with former supervisors or colleagues where you worked.

REPORTS MAY CONTAIN

The consumer reports or investigative consumer reports may contain public record information which may be requested or made on you including, but not limited to: consumer credit, criminal records, civil cases in which you have been involved, driving history records, current motor vehicle insurance coverage information, education records, previous employment history, workers compensation claims history, social security traces, military records, professional licensure records, eviction records, drug testing, government records, and others.

You further understand that these reports may include experience information along with reasons for termination of past employment. You also acknowledge and understand that information from various federal, state, local and other agencies which contain information about your past activities will be requested, and that a consumer report containing injury and illness, drug testing, or other medical records and medical information may be obtained only after a tentative offer of employment has been made.

YOUR RIGHTS AS A CONSUMER

You are hereby notified that you have the right to make a timely request for a copy of the scope and nature of the above investigative background report and/or a complete copy of your consumer report contained in AccuScreen files on you at the time of your request by providing proper identification,

You are further notified that, prior to being denied employment based in whole or in part on information obtained in the consumer report, you will be provided a copy of the report, the name, address, and telephone number of the consumer reporting agency and a description in writing of your rights under the Fair Credit Reporting Act.

Correspondence to AccuScreen should be forwarded to:

AccuScreen - 1038 Main Street - Baton Rouge, La. 70802 - (225) 343-8378

AUTHORIZATION TO OBTAIN CONSUMER REPORT

The following is information required in order for LOUISIANA HEALTH & REHAB INC. to obtain a complete consumer report: Full Legal Name: _____ (First Name, Full Middle Name, Last Name) Street Address: ____ Social Security Number: _____ Date of Birth: Driver's License Number: ______Issuing State: _____ Expiration date: _____ Other or Former Names: (AKA, Maiden Names, Married Names, Surnames, etc.) Email Address: Your signature below indicates the following: 1) You authorize, without reservation, AccuScreen or any third party to obtain and/or furnish to LOUISIANA HEALTH & REHAB INC. any records or information referenced in the provided disclosure statement for employment related purposes: 2) You authorize ongoing procurement of any records or information, reports, and records at any time during your employment to the extent allowed by the law; You authorize the use of a fax or photocopy of this authorization as having the same authority as the original; You authorize and request, without reservation, any present or former employer, school, police department, financial institution, division of motor vehicles, consumer reporting agency, or other entity, person or agency having knowledge about you to furnish LOUSIANA HEALTH & REHAB INC. and/or AccuScreen with any and all background information in their possession regarding you for these stated and the stated of the second states of the secon employment purposes: You understand and agree that in connection with your employment your consumer report information, whether investigative or

- otherwise, may be shared with and/or reviewed by all applicable parties involved in the hiring process;
- You have read and fully understand the foregoing disclosure and this authorization.

reporting agency shall furnish a copy of your consumer report.

- You certify that all the information you have provided on this form is true, complete, correct and accurate; and
- You certify you have received, reviewed, and understand the "Summary of Your Rights under the Fair Credit Reporting Act (15 U.S.C. §1681 et seq.)" which is published by the Federal Trade Commission to help you know your rights.

Signature:	Date:
*This information will be used for background screening purposes only.	
Check this box if you are a Minnesota Oklahoma, or California applicant, and you would like to receive a copy of your consumer report, if one is obtained. For California applicants only: a copy of your report will be sent to you by the above-referenced employer within three business days beginning on the date of receipt by the employer. For Minnesota applicants only: the consumer reporting agency shall furnish a copy of your	
consumer report within twenty-four hours of providing it to the above	-referenced employer. For Oklahoma applicants only: the consumer

CALIFORNIA APPLICANTS: Pursuant to § 1786.22 of the California Civil Code, you may view the file maintained on you by AccuScreen during normal business hours. You may also obtain a copy of this file, either in person or by mail, by submitting proper identification and paying the costs of duplication services. You may also receive a summary of the file by telephone upon production of adequate identification. AccuScreen is required to have trained personnel available to explain your file to you and any coded information contained therein. You may appear in person alone, or with another person of your choice, provided that this additional person furnishes proper identification.

California Civil Code section 1786.16(2) requires a separate disclosure and authorization to be signed by an applicant or current employee each time a background check is performed for employment purposes this requirement does not apply in situations where the employer has a suspicion of wrongdoing or misconduct by a current employee.

MAINE APPLICANTS: Pursuant to Maine state law, § 1317(2), AccuScreen is required to reinvestigate any consumer dispute made by a consumer residing in the state of Maine within 21 calendar days of notification of the dispute by the consumer.