

**Pre-Employment and Continued Employment/ Volunteer Disclosure  
Authorization, Disclosure and Release**

I understand that in connection with my application for employment (including contract for services) with Summer Trails Day Camp Inc., that a consumer reports third party which may contain record information and investigative consumer reports consisting of interviews with employers, neighbors, friends, and associates may be requested while conducting a background check. These reports may include the following types of information: names of employers and dates of previous employment, reason for termination of employment, work experience, accidents, etc. I further understand that such reports may contain public record information concerning my driving record, worker's compensation claims, credit, bankruptcy proceedings, criminal records etc., from federal, state and other agencies which maintain such records. I hereby consent to your obtaining the above information from such agency.

I authorize, without reservation, any party or agency contacted by the consumer reporting agency to furnish the above-mentioned information.

I have a right to make a request to the independent Background Agency chosen, upon proper identification, a copy of the nature and substance of all information in its files on me at the time of my request, including sources of information; and the recipients of any reports on me which the agency has previously furnished within the two year period proceeding my request.

I hereby authorize procurement of consumer report(s). I hereby release Summer Trails Day Camp Inc., from any and all liability related to the procurement or disclosure of any information provided by me or obtained about me in connection with my Application with Employer/Organization. If hired (or contracted), this authorization shall remain on file and shall serve as ongoing authorization for you to procure consumer reports and investigate consumer reports at any time during my employment (or contract) period.

I acknowledge receipt of a copy of Article 23-A of New York Correction Law.

Although furnishing your Social Security Number is not optional, it shall be used for NO other purpose than to make the process for conducting a background search more accurate. It shall not be sold, or in any way transferred to a third party except for the express purpose of conducting the background check.

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Applicant Signature

Date

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Printed Name

Social Security Number

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Date of Birth

Former Last Name (if applicable)

Current Address:

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Street

City

State

Zip

Former Address:

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Street

City

State

Zip