Employment Background Screening Disclosure

A separate standalone form for employment purposes

Code Blue CPR Services and Shell CPR LLC may obtain a consumer report about you for employment purposes. A consumer report is a background report obtained from a consumer reporting agency and may include information about criminal records, identity verification, employment history, education, professional licenses, driving records when relevant to the position, and other job-related records permitted by law.

The report may be used to evaluate your eligibility for employment, continued employment, assignment, promotion, reassignment, or retention. The company will obtain your written authorization before requesting the report. Additional notices or rights may apply under state or local law.

This document is the disclosure required before an employment consumer report is obtained. It is separate from the employment application.

ACKNOWLEDGMENT OF DISCLOSURE

By signing below, I acknowledge that I received and read this Employment Background Screening Disclosure before any consumer report was requested.

Applicant printed name _____	**Date** _____
Applicant signature _____	**Position applied for** _____

Keep a copy of this disclosure for your records.

AUTHORIZATION FOR EMPLOYMENT BACKGROUND SCREENING

I authorize Code Blue CPR Services, Shell CPR LLC, and their authorized consumer reporting agency or agencies to obtain consumer reports about me for employment purposes, as described in the separate Employment Background Screening Disclosure provided to me. I authorize employers, schools, licensing bodies, government agencies, and other lawful information sources to provide job-related information to the consumer reporting agency or agencies, subject to applicable law.

I understand that this authorization does not require the company to obtain a report and does not guarantee employment. If a report is obtained and the company considers taking adverse action based in whole or in part on the report, I will receive the notices and information required by applicable law.

APPLICANT IDENTIFICATION

Full legal name _____	**Other names used for records verification** _____
Current street address _____	**City State ZIP** _____
Previous address if needed for records search _____	**City State ZIP** _____
Primary phone _____	**Email address** _____

For privacy and security, do not write your Social Security number on this form and do not send it by ordinary email. Provide any Social Security number, date of birth, or copy of identification only through the company's designated secure screening process. Such identifiers are used to match records and are not used to make employment decisions based on age or other protected status.

AUTHORIZATION AND SIGNATURE

Applicant printed name _____	**Date** _____
Applicant signature _____	**Position applied for** _____