DISCLOSURE TO EMPLOYMENT APPLICANT

This is to notify you that a Consumer Report and/or Investigative Consumer Report will be conducted on you for employment purposes.

By signing the release below, I herby authorize the City of Bartlesville or its agents to contact any and all corporations, former employers, credit agencies, educational institutions, law enforcement agencies, city, state, county, and federal courts, military services to release information about my background including but not limited to, information about employment, education, consumer credit history, driving record, criminal record and general public records history to the City of Bartlesville and its agents.

I release from all liability all persons, companies, schools supplying such information. I indemnify the City of Bartlesville against any liability, which may result from making such requests. This release shall remain in effect for the length of my employment. I understand and I may have a right to request additional disclosures regarding the nature and scope of the investigation. I also understand that I will be given a copy of the consumer report and a written description of my rights under the Fair Credit Reporting Act.

I believe to the best of my knowledge that all information I have provided is accurate, true and correct and that I fully understand the terms of this release.

| (Please print) Name: | |
|---------------------------------------|--------|
| (Please print) Other names used: | |
| Address: | |
| City/State/Zip: | |
| Date received degree (if applicable): | |
| Social Security #: | |
| Drivers License Number & State: | |
| Date of Birth: | |
| | |
| | |
| (Signature of Applicant) | (Date) |