

**DISCLOSURE TO APPLICANT
REGARDING PROCUREMENT OF
A BACKGROUND CHECK**

In connection with your application, we will procure a background check on you from First Advantage LNS Screening Solutions as part of the process of considering your candidacy as an employee. In the event that information from the report is utilized in whole or in part in making an adverse decision, we will provide you with a copy of the report and a description in writing of your rights under the federal Fair Credit Reporting Act.

The Fair Credit Reporting Act gives you specific rights in dealing with consumer reporting agencies. Upon request we can provide you with a summary of these rights.

By your signature below, you hereby authorize us to obtain a background check about you in order to consider you as an employee of the South Florida Fair and Palm Beach County Expositions, Inc.

A criminal background check will be conducted. The below information is required in full.

PLEASE PRINT

Department Applied For: _____

Applicant's Name: _____
FIRST, MI, LAST

Maiden or Names Used: _____

Social Security#: _____

Applicant's Address: _____

City / State / Zip: _____

Telephone Number: _____

DOB: _____
MM/DD/YY

NOTE: Date of Birth information is used **ONLY** by First Advantage LNS Screening Solutions for verification of identity and is not used for any purpose by the South Florida Fair and Palm Beach County Expositions, Inc.

Applicant's Signature: _____ Date _____