ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by **the Company** at any time after receipt of this authorization and throughout my engagement, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, insurance company, or other party to furnish any and all background information requested by Praesidium, 2225 E. Randol Mill Rd., Suite 630, Arlington, TX, 76011, 800-743-6354, **the Company** itself, and/or a related third-party entity only if I am being considered for a direct or temporary engagement with or by them. I agree that a facsimile ("fax") or electronic or photographic copy of this Authorization shall be as valid as the original.

State of Washington applicants and employees only: You hav nature and scope of any investigative consumer report as well Washington law.	e the right to receive a complete and accurate disclo as a written summary of your rights and remedies u	sure of the nder
Massachusetts and New Jersey applicants and employees on any investigative consumer report requested by the Company directly.	y: You have the right to inspect and promptly receive by contacting the consumer reporting agency identif	e a copy of ied above
New York applicants and employees only: You have the right report requested by the Company by contacting the consumer you also acknowledge receipt of Article 23-A of the New York	reporting agency identified above directly. By signir	nsumer ng below,
Minnesota applicants and employees only: You have the right accurate disclosure of the nature and scope of any consumer receipt of your request or of Company's request for the report, receive a copy of a consumer report if one is obtained by the Company's request for the report.	report. Agency must make this disclosure within five whichever is later. Please check this box if you wou	days of
Oklahoma applicants and employees only: Please check this one is obtained by the Company.	oox if you would like to receive a copy of a consume	r report if
California applicants and employees only: By signing below, y BACKGROUND INVESTIGATION PURSUANT TO CALIFORI copy of an investigative consumer report at no charge if one is receive such a copy under California law. □	NIA LAW. Please check this box if you would like to	receive a
Signature:	Date:	
Print Name:	Last	11
Maiden Name (if applicable):		
Address:	City State	Zip
Social Security Number: *This information will be used for background screening purposes only.	* Date of Birth:	*
Driver's License Number:	DL State:	
Telephone Number:		

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

Presbytery of Sheppards and Lapsley	
about you from a consumer reporting agency for purposes of employment, volunteer po	
or reassignment (hereafter known as your "engagement""). Thus, you may be the subjection	
consumer report" which may include information about your character, general reputation	
and which can involve personal interviews with sources such as your neighbors, frie	
information regarding your criminal history, credit history, motor vehicle records ("dr	
employment history or other background checks. You have the right, upon written red of this notice, to request disclosure of the nature and scope of any investigative consumation.	
scope of the most common form of investigative consumer report obtained with	
investigation into your education and/or employment history conducted by Praesidiun	
TX, 76011, 800-743-6354, or another outside organization. You should carefully co	
disclosure of the nature and scope of any investigative consumer report.	,
Signature:	Date:
Print Name:	