Consumer Report / Investigative Consumer Report Disclosure and Release of Information Authorization

I authorize **The Animal Welfare Society** and **PT Research, Inc.**, a Consumer Reporting Agency ("CRA"), to retrieve information from all personnel, educational institutions, government agencies, companies, corporations, credit reporting agencies, law enforcement agencies at the federal, state or county level, relating to my past activities, to supply any and all information concerning my background, and release the same from any liability resulting in providing such information. The information received may include, but is not limited to, academic, residential, achievement, job performance, attendance, litigation, personal history, credit reports, driving history, and criminal history records. I understand that this information may be transmitted electronically and authorize such transmission.

I understand that a Consumer Report or Investigative Consumer Report ("Consumer Report") may be prepared summarizing this information. If my prior employers and/or references are contacted, the report may include information obtained through personal interviews regarding my character, general reputation, personal characteristics and/or mode of living. I may request a copy of any report that is prepared regarding me and may also request the nature and substance of all information about me contained in the files of the consumer-reporting agency. I understand that I have the right to inspect those files with reasonable notice during regular business hours and that I may be accompanied by one other person. The consumer reporting agency is required to provide someone to explain the contents of my file. I understand that proper identification will be required and that I should direct my request to: PT Research Inc., P.O. Box 4540, Manchester NH 03108 Phone 1-866-737-2714 Attention: Compliance Officer.

request to: PT Research Inc., P.C). Box 4540, Man	chester NH 03108 Phone 1-86	6-737-2714 Attentio	n: Compliano	ce Officer.
I am willing that a photocopy of the above named company, this at				; and that if e	employed by
Signature of applicant/employ	ee S	Social Security Number		Date	
NOTE: The following information	*	-			
identification purposes in verifying	g information on y	our Employment Application. I	PLEASE PKIN	I CLEAK	LI.
Last Name	First Name			Middle Name	
Street Address		City		State	ZIP
Driver's License Number	State	Expiration date		Date of Birth	
List any other CITIES AND STA	ΓES in which you	have lived during the previous	7 years.		_
•	-				
List any other LAST NAMES you	have used during	the previous 7 years.			
List any other LAST NAMES unc	ler which you rece	ived your GED, high school dip	oloma, or other degre	es.	
Are you applying for employment If so, would you like to request a c				□ No □ No	
*CALIFORNIA APPLICANTS: California are defined as "Investig reputation, personal characteristics maintained at the CRA during norm cost of duplication by appearing at explain the report(s) and to explain choice, if s/he furnishes proper iden	gative Consumer, and/or mode of nal business hours. the CRA in person any coded inform	Reports." These reports may living. Under California Civil. You may also obtain a copy by h, by mail, or by telephone. The	contain information il Code §1786.22, y y submitting proper i e CRA is required to	on your char ou may view dentification a have personn	racter, general the report(s and paying the el available to
NEW YORK and MAINE APPLI requested about you by the above-n		ve the right, upon written reques	st, to be notified whet	her a consume	er report was
NEW YORK APPLICANTS: Sho employer must provide to the applic the New York Correction Law, which	ant or employee w	who is the subject of the report,	a printed or electronic	c copy of Arti	cle 23-A of
Please initial her	e to acknowledge	receipt of Article 23-A of the	New York Correcti	on Law.	