

CONSENT AND AUTHORIZATION TO OBTAIN INFORMATION

At any time during the tenure of my employment with Linda Weston Personnel Inc. ("the Company"), I understand that a Consumer Report may be requested for employment purposes from Sherpa Business Solutions, Inc or it parent company, Firstsource Solutions Ltd., on behalf of the Company, and I hereby authorize the Company to procure such a report. I understand that the Consumer Report may include information regarding my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living. This report may be compiled with information from credit bureaus and public records, including but not limited to, Social Security Number, motor vehicle operation history, workers' compensation information, court records and criminal history to the extent permitted by law from various local, state and federal agencies.

At any time during the tenure of my employment, I also understand that an Investigative Consumer Report may be requested for employment purposes from the Company on behalf of Sherpa Business Solutions, Inc., and, as required under Section 606((a) of the federal Fair Credit Reporting Act ("FCRA), 15 U.S.C. Section 1681 et seq., I understand that the Investigative Consumer Report may include information regarding my character, general reputation, personal characteristics, mode of living, work habits, performance, experience, along with reasons for termination of past employment, whichever is applicable, and that such information may be obtained through personal interviews with neighbors, friends or associates of mine or with other persons with whom I am acquainted who may have knowledge of such information. I hereby authorize Sherpa Business Solutions, Inc., on behalf of the Company, to procure such an Investigative Consumer Report for employment purposes.

In accordance with the FCRA and any other applicable law, I further understand that I may request a complete and accurate disclosure of the nature and scope of the investigation requested, and that I have a right to request a written summary of my rights prepared pursuant to Section 609(c) of the FCRA.

I VOLUNTARILY AND KNOWINGLY AUTHORIZE ANY PRESENT OR PAST EMPLOYER, SUPERVISOR OR MANAGER, COLLEGE, UNIVERSITY OR OTHER EDUCATIONAL INSTITUTION, ADMINISTRATOR, LAW ENFORCEMENT AGENCY, LOCAL, STATE OR FEDERAL AGENCY, CREDIT BUREAU, COLLECTION AGENCY, PRIVATE BUSINESS, MILITARY BRANCH, THE NATIONAL PERSONNEL RECORDS CENTER, BUSINESS OR PERSONAL REFERENCES, AND/OR ANY OTHER PERSONS OR ENTITIES TO PROVIDE RECORDS AND/OR INFORMATION THEY MAY HAVE RELATING TO MY CRIMINAL HISTORY, MOTOR VEHICLE HISTORY, SOCIAL SECURITY NUMBER, EARNINGS HISTORY, CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, MODE OF LIVING, AND EMPLOYMENT (INCLUDING REASONS FOR TERMINATION), CREDIT HISTORY, CREDIT STANDING, CREDIT CAPACITY OR ANY OTHER INFORMATION REQUESTED BY LEXUS NEXIS DEEMED PERTINENT TO MY EMPLOYMENT AND/OR TO VERIFY INFORMATION THAT I HAVE VOLUNTARILY SUPPLIED.

I understand that any Consumer Report or Investigative Consumer Report requested will be used strictly for employment purposes as defined under Section 603(h) and authorized under Section 604(a)(3)(B) of the FCRA, as a report to be used for the purpose of evaluation for employment, promotion, reassignment or retention as an employee. I further understand that request for workers' compensation information shall be made after being hired and may include "any and all" injuries pursuant to state law and in compliance with the Federal Americans with Disabilities Act. In addition, any hiring, promotion, reassignment, or retention as an employee may be conditional upon the receipt of satisfactory information as required and that to be considered for employment, promotion, or reassignment, I must authorize the procurement of such Report(s). A photographic or faxed copy of this form shall be as valid as the original.

PLEASE WRITE CLEARLY

Employee's Name – Please Print

Date

Employee's Signature

Date of Birth

Street Address

_____-_____-_____
Social Security Number

City, State, Zip

Only residents of MN, CA and Oklahoma need to fill out the below section.

MN & Oklahoma Residents please note: In connection with your employment, your consumer report may be obtained and reviewed. Under Minnesota and Oklahoma law, you have a right to receive a free copy of your consumer report by checking the appropriate box below.

- YES, I am a Minnesota resident and would like a free copy of my consumer report.
 YES, I am an Oklahoma resident and would like a free copy of my consumer report.

CA Residents please note: In connection with your employment, your credit report may be obtained and reviewed. Under CA law, you have a right to receive a free copy of your credit report by checking the appropriate box below. Your credit report will be mailed to you by the credit bureau. In the alternative, you may elect to receive the entire investigative consumer report, which will include your credit report.

- YES, I am a California resident and would like a free copy of my credit report; or
 YES, I am a California resident and would like a free copy of my investigative consumer report.

Employee's Printed Name

Street Address

City, State, Zip
