

Authority to Release Information

I understand that in processing my application with Dean Snyder Construction, an investigation may be made in which information is obtained through personal interviews, and a review of information held by law enforcement or other government agencies. I authorize you to verify my past employment and education, criminal records, credit history, motor vehicle records, personal references, and other job related data provided on this application, or via the interview process. I authorize the appropriate individuals, companies, institutions or agencies to release information, and I release them from any liability as a result of such inquiries or disclosures. A consumer report may be generated summarizing this information.

I further understand and waive my right of privacy in this investigation and release and hold harmless Dean Snyder Construction, and its agent Verified Credentials, Inc. from any liability.

I have a right under the "Fair Credit Reporting Act" to obtain a copy of this report by directing a written request to Verified Credentials, Incorporated.

I agree that any decision to hire me is contingent upon the results of my report, and certify that all statements and answers on my application, resume, or interview are true and complete to the best of my knowledge. I understand that if any statements are found to be false or that if information has been omitted, this will be cause for disqualification and immediate termination of my employment.

LAST NAME	FIRST NAME	MIDDLE NAME
------------------	-------------------	--------------------

PREVIOUS NAME/MAIDEN NAME/A.K.A.S	DATE OF CHANGE
--	-----------------------

STREET ADDRESS

CITY	STATE	ZIP CODE
-------------	--------------	-----------------

PLEASE LIST THE CITIES AND STATES YOU HAVE LIVED IN, IF THE ABOVE ADDRESS DOES NOT ENCOMPASS 7 YEARS.

SOCIAL SECURITY NUMBER	DATE OF BIRTH
-------------------------------	----------------------

DRIVERS LICENSE NUMBER	STATE ISSUED
-------------------------------	---------------------

I UNDERSTAND THAT A PHOTOCOPY OF THIS AUTHORIZATION WOULD BE ACCEPTED WITH THE SAME AUTHORITY AS THE ORIGINAL.

SIGNATURE	DATE
------------------	-------------