



RELEASE AUTHORIZATION FOR BACKGROUND INVESTIGATION

In connection with your application to work at Operation Breakthrough as an employee or volunteer, you authorize Operation Breakthrough, Inc. and its background investigation service providers (Consumer Reporting Agencies), to procure and review background checks/consumer reports. You understand such reports will include information regarding state and federal criminal history or child/elder abuse or neglect, and your inclusion in any jurisdiction's registry of sexual offenders.

You also understand that your driving record (if appropriate to your duties), licensure in a specific profession, education, volunteer and employment history and other matters which reflect on your character and general reputation are a part of the background investigation.

The reports may be compiled from credit bureaus, court records, department of motor vehicles, past employers or volunteer service records, educational institutions, governmental license and registration entities, business or personal references, and any other source required to verify information.

The Consumer Financial Protection Bureau's Summary of Rights under the Fair Credit Reporting Act is provided in a separate written document. Your signature below acknowledges your receipt of the document.

You do hereby give consent (authorization) to Operation Breakthrough to request and receive such information prior to employment, annually and periodically throughout employment. You acknowledge that a fax, image, or copy of this authorization is as valid as the original and good for one year.

PRINT NAME

SIGNATURE

DATE OF SIGNATURE

ADDRESS

CITY, STATE ZIP CODE

SOCIAL SECURITY NUMBER

BIRTH DATE