



Notice and Disclosure

DISCLOSURE AND AUTHORIZATION FOR BACKGROUND INVESTIGATION

San Diego Metropolitan Transit System intends to obtain an investigative consumer report and/or consumer credit report about you for employment purposes, including in connection with your application for employment. An "investigative consumer report" may include information pertaining to your character, general reputation, personal characteristics, or mode of living. A "consumer credit report" includes any information regarding your credit worthiness, credit standing, and credit capacity. The nature and scope of the investigative consumer report the company is seeking may include inquiries regarding your educational background; work history; personal financial status and credit history if your job or the job for which you are applying involves handling money or company finances; court records, including criminal conviction record as permitted by law; driving history, if driving is part of your job or the job for which you are applying; and references obtained from professional and personal associates. Upon request, you may receive additional information as to the nature and scope of the investigative consumer report obtained about you.

If you would like a copy of the consumer report obtained about you, please check the box at the bottom of this form. If the company is considering making an adverse employment decision that affects you based on information contained in the report, you will be notified of this before the decision is finalized. The consumer reporting agency that will be providing the company with the investigative consumer report and/or consumer credit report is Kristy Investigative Services, Inc. 958 Postal Way, Suite 6-C, Vista, CA 92083; 1-800-729-9399. If you are applying for, or employed in, a position for which the company will require a credit report, you will receive a free copy of such credit report at the same time the report is provided to the company unless you check the box below waiving your right to receive a copy.

Authorization: By my signature below, I authorize the company to obtain an investigative consumer report and/or a consumer credit report about me and to consider such reports when making hiring, retention, promotion or other employment decisions that affect me. I further authorize all previous employers, educational institutions, consumer reporting agencies and other persons or entities having information about me to provide such information to the company or the consumer reporting agency

If I am applying for employment, I understand that any offer of employment I may receive is contingent upon the outcome of my background check, and that this Disclosure and Authorization is not an offer for employment by the company or a contract for employment with the company.

Signature

ELECTRONIC SIGNATURE: Please type your name as it is listed above:

I testify that this statement is true to the best of my knowledge:

Date . . . . . (will auto populate once form is submitted)	Oct 28, 2025 04:49 pm
I authorize my Electronic Signature . . . . .	Payton Miller Accepted
Legal First Name . . . . .	Payton
Legal Last Name . . . . .	Miller
Social Security Number . . . . .	203-76-6184
Date of Birth . . . . .	03/21/1997
Drivers License Number . . . . .	.....
Drivers License State . . . . .	California
Street Address . . . . .	1306 Petree ST, apt 395
City . . . . .	El Cajon
State . . . . .	California
Zip Code . . . . .	92020

I wish to receive a copy of any investigative consumer report obtained about me and do not waive my right to receive a copy of any consumer credit report about me. Yes

Certification and Release Statement

Certification and Release Statement

Please read carefully before signing below:

I certify that the information given by me in this employment application is true and correct and contains no material omissions of any kind. I understand that any false statements or material omissions of fact made by me in this employment application or the interview process may disqualify me from consideration for employment or, if hired, result in my termination. I release Metropolitan Transit System, acting on its own behalf or on behalf of its Operating Divisions (collectively the "Agency"), its employees and agents from any and all liability for failing to hire me or terminating my employment due to such false information or material omissions.

In exchange for my being considered for employment by the Agency, I authorize the companies, schools, or persons named above to give the Agency or its designated representative(s) any information regarding my employment or educational background, together with any information they may have regarding my qualifications for the job for which I am applying, whether or not it is in their records. I hereby release the Agency, its designated representative(s) and said companies, schools, or persons and all of their employees and agents from any and all liability resulting from the use or disclosure of this information.

I understand that, due to the nature of the Agency's business, employees in certain job classifications may be required to work overtime and/ or shifts, including nights, Saturdays, Sundays, and holidays. I understand and agree to abide by these requirements if I accept an offer of employment from the Agency for such a position. In addition, if hired, I agree to comply with all company rules and policies.

I understand that before I can begin employment with the Agency, I must pass a pre-employment physical examination, which includes a drug screening test. I understand that as a condition of being considered for employment I must consent to such examination and to the release of the results of the examination to the Agency. I understand that any offer of employment with the Agency is contingent upon passing this examination and that if I fail the examination for any reason the offer of employment will be withdrawn. By signing below I agree to these conditions and the required physical examination.

For Applicants for Non-Union positions:

I UNDERSTAND AND AGREE THAT IF I AM HIRED, MY EMPLOYMENT RELATIONSHIP WITH THE AGENCY WILL NOT BE FOR A SPECIFIED TERM AND MAY BE TERMINATED BY THE AGENCY OR ME AT ANY TIME, WITH OR WITHOUT CAUSE. In addition, if I am hired the Agency will have the right to impose discipline or alter my position, compensation, or benefits at any time, at its discretion. I understand and agree that no representative of the Agency may enter into any agreement contrary to the foregoing unless it is done by way of specific, written agreement signed by the Chief Executive Officer.

I have read the above statement . Yes

Electronic Signature

Legal First Name Payton  
Legal Last Name Miller

ELECTRONIC SIGNATURE: Please type your name as it is listed above:

I hereby certify that all statements made in this application are true and correct to the best of my knowledge and belief. I authorize past employers, schools, persons and organizations having relevant information or knowledge to release to MTS for its use in deciding whether or not to offer me employment and specifically waive any required written notification. I hereby release employers, schools, persons and organizations from all liability in responding to inquiries in connection with my application. Upon written request by me, within a reasonable period of time, MTS will make available to me the nature and scope of all reports of every type obtained

Payton Miller  
Accepted  
Date Oct 28, 2025 04:49 pm  
(will auto populate once form is submitted)