



BACKGROUND INVESTIGATION RELEASE

I, _____, do hereby authorize MGM Resorts International to seek from school officials, government agencies, the military, law enforcement agencies, credit reporting agencies, present or previous employers, any and all information in their knowledge or possession pertaining to my employment history or my qualifications and ability to work at MGM Resorts International, including but not limited to, information and opinions pertaining to the nature of my former jobs and job duties, how I performed those duties, salary history, attendance record, character, academic record, credit history, ability to perform the essential functions of my prior positions and any performance, behavior, attitude, or other problems or good points perceived by them.

This information is for record keeping purposes and may affect employment decisions. This questionnaire will be kept separate from my application and any subsequent file.

Further, I authorize MGM Resorts International to seek from any agency, including, but not limited to, the Nevada Department of Public Safety, the Las Vegas Metropolitan Police Department and any other agency of criminal justice relied upon by MGM Resorts International, to release any criminal record information concerning me, including, but not limited to, the results of and reports concerning any investigations, and any and all documentation, test results or information of any type obtained from any source during the course of such investigation.

Signature

Date

FAIR CREDIT REPORTING

In connection with my employment, I understand that consumer reports which may contain public record information may be requested from various consumer reporting agencies (CRA). These reports may include the following types of information: names and dates of previous employers, reason for termination of employment, work experience, accidents, etc. I further understand that such reports may contain public record information concerning my driving record, workers' compensation claims, credit, bankruptcy proceedings, criminal records, etc., from federal, state and other agencies which maintain such records; as well as information concerning previous driving record requests made by others from such state agencies, and state provided driving records.

I AUTHORIZE, WITHOUT RESERVATION, ANY PARTY OR AGENCY CONTACTED BY A CRA TO FURNISH THE ABOVE-MENTIONED INFORMATION.

I have the right to make a request to a CRA, upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including the sources of information; and the recipients of any reports on me which the CRA has previously furnished within the two year period preceding my request.

I hereby authorize procurement of consumer report(s) by MGM Resorts International. This authorization shall remain on file and shall serve as ongoing authorization for MGM Resorts International to procure consumer reports at any time during my employment period.

Print Name

Social Security No.

Applicants Signature

Date

PERSONAL IDENTIFICATION INFORMATION:

Name: _____
(LAST) (FIRST) (MIDDLE)

Any Other Name Used: _____
(LAST) (FIRST) (MIDDLE)

Date of Birth: _____ Social Security Number: _____ Sex: _____

Race: _____ Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____

AUTHORIZATION FOR RELEASE OF INFORMATION

In consideration for processing my application for employment or, if hired by the employer named below or a subsidiary, I, the undersigned, whose name and personal identification information voluntarily appears above, do hereby and irrevocably agree to the following:

1. I hereby authorize the Nevada Department of Public Safety, the Las Vegas Metropolitan Police Department and any other agency of criminal justice, to search for and release criminal history record information to the employer, prospective employer or their designee named below. In giving this authorization, I expressly understand that the information may include information pertaining to notations of arrest, detentions, indictments, information or other charges for which the final court disposition is pending or is unknown to the above referenced agencies. For records containing final court disposition information, I understand that the release may include information pertaining to dismissals, acquittals, convictions, sentences, correctional supervision information and information concerning the status of my parole or probation when applicable. Further, I understand that the information may include similar information obtained from other local, state and federal criminal justice agencies and may include information pertaining to convicted person data, outstanding arrest warrants, missing persons, and current and/or prior gaming and non-gaming sheriff's work cards that were issued to me.
2. In giving the above authorization, I understand that all information provided may be reviewed by the employer, prospective employer, his designee(s) in Human Resources, contracted background screening companies and/or any other person approved by the Nevada Department of Public Safety to make an informed employment decision on behalf of the employer named below. This information is confidential, and may not be further disseminated without my expressed written permission or an order from a court of law having jurisdiction. _____(Please initial)
3. I understand that I may review and challenge the accuracy of any and all criminal history records which are returned to the employer or their designee, and that the proper forms and procedures will be furnished to me by the Nevada Department of Public Safety upon request.
4. I hereby release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, its officer(s), agent(s) and/or employee(s) who conducted my criminal history records search and provided information to the requestor for any statement(s), omission(s), or infringement(s) upon my current legal rights. I further release and promise to hold harmless and covenant not to sue any persons, firms, institutions or agencies providing such information to the State of Nevada on the basis of their disclosures. I have signed this release voluntarily and of my own free will.

A reproduction of this authorization for release of information by photocopy, facsimile or similar process, shall for all purposes be as valid as the original.

(Please circle one)

Prospective Employer/Employer: _____

Applicants Signature: _____ Date: _____
(This waiver is non expiring if employed by employer)

Applicants Physical Address: _____