

Background Check Authorization

I authorize ITSCO, LLC ("the Company") and its authorized agents to verify information relevant to my qualifications for employment. This may include inquiries into my background, references, prior employment, education, consumer reports, and criminal history records from public or private sources, as permitted by law.

I authorize the Company to verify all information I have provided and to obtain additional information necessary to evaluate my eligibility for employment. I understand that additional written authorization may be required as a condition of employment or continued employment.

I release any individual or entity providing information to the Company pursuant to this authorization from any liability arising from such disclosure. I understand that false statements or omissions may result in rejection of my application or termination of employment if discovered after hire.

This authorization may be executed electronically and shall be as valid as an original signature.

Please print your full legal name:

Last Name _____ First _____ Middle _____

Signature _____

_____/_____/_____
Today's Date (Month/Day/Year)

Background Report INFORMATION:

For Identification Purposes Only: Date of Birth ____/____/____ (Month/Day/Year)

Social Security Number _____

Driver's License Number _____ State Issuing License _____

Enter Nickname(s) Used _____

Enter Any Other Names Used (including maiden names):

First Name _____ Middle Name _____ Last Name _____

First Name _____ Middle Name _____ Last Name _____

First Name _____ Middle Name _____ Last Name _____

Addresses Within The Past Seven Years (use a separate sheet as needed)

Previous Address:

Street Address _____

Prior City/State/ZIP _____

From ____/____/____ (Month/Day/Year) To ____/____/____ (Month/Day/Year)

Previous Address:

Street Address _____

Prior City/State/ZIP _____

From ____/____/____ (Month/Day/Year) To ____/____/____ (Month/Day/Year)

****Your current address and email address will be utilized from the onboarding google form.**

Electronic Signature Certificate

ESIGN Act Compliance Statement

This document was electronically signed in compliance with the Electronic Signatures in Global and National Commerce Act (ESIGN Act), 15 U.S.C. § 7001 et seq. The signer has consented to conduct this transaction electronically and has been provided with the required disclosures.

Signer Information

Name: User Two

Email: user2@user2.com

User ID: 16

Signature Timeline

Consent Given: 2026-01-07T12:45:28.000Z

Intent to Sign: 2026-01-07T12:45:29.000Z

Network Information

Consent IP: localhost

Intent IP: localhost

Audit Trail

{}