

Authorization

Some education institutions, employers, and other data providers require an authorization to obtain information that contains a "wet" or mouse-over signature.

I understand that in connection with my application for employment, I have already been given a separate Disclosure form by the Employer explaining what information will be obtained from a third party about me and an authorized the obtaining of the information.

By moving my mouse in the signature box below, I hereby authorize, without reservation, any administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all information requested about me to Corporate Screening Services, Inc., 7271 Engle Rd., Ste 200, Cleveland, OH 44130, Phone: 800-229-8606, Fax: (440) 243-4204, www.CorporateScreening.com or other third party agent of the Employer.

I agree that a facsimile ("fax") or photographic copy of this Authorization shall be as valid as the original.

I understand that if I want a paper copy of this Authorization Form, I may print it out.

I understand that typing my name in the First Name and Last Name sections below and the Last Four Digits of My Social Security Number below, and clicking on the "I Agree" button below, constitutes my electronic signature, dated as of when I click on the link, and that by doing so:

- I am authorizing the Consumer report(s) described above and the release of information about me, and
- I am consenting to use electronic means to (i) sign this form, and (ii) receive the notice statement appearing above.

Candidate's Signature



Candidate's Name

Angelo Pagunsan

Date Signed: Friday, April 7, 2023