

# Profile Advantage Consent

## AUTHORIZATION BY APPLICANT/EMPLOYEE TO CONDUCT BACKGROUND INVESTIGATION

By signing below, you acknowledge receipt of the document entitled FCRA NOTICE REGARDING BACKGROUND INVESTIGATION and the disclosure entitled A Summary of your Rights Under the Fair Credit Reporting Act and acknowledge that a background check will be conducted by the Company.

I understand that the scope of my authorization is not limited to the present and, if I am hired, will continue throughout the duration of my employment and allow the Company to conduct future screenings for retention, promotion or reassignment, as permitted by law and unless revoked by me in writing.

I hereby authorize the obtaining of consumer reports by the Company at any time after receipt of this authorization. To this end, I authorize any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by First Advantage and/or the Company.

### Consent And Authorization

I have read and accept the terms of this online profile. [I Agree](#)

First Name (given name) :

Ma Antonina

Last Name (family name) :

Bustamante



Signature

Date : Thu Feb 23 23:10:38 GMT 2023