CERTIFICATION AND AUTHORIZATION

I hereby certify that all information provided in this form or any other documentation that I have given is true and accurate to the best of my knowledge. I understand that any misrepresentation, falsification or omission of information may disqualify my employment, and may result in my dismissal.

I authorize Argus Screening and its partners and affiliate to conduct a background check / verification relative to this form. I hereby grant authority for the bearer of this letter to access or be provided with full details of my previous records.

|  |  |  |
| --- | --- | --- |
| Full Name | Signature | Date |
| Marinel G. Arevalo | Marinel G. Arevalo | June 4, 2021 |