

Merchants

INFORMATION SOLUTIONS, INC.

*“Dedicated to delivering world-class
technology based credit and
information solutions”*

EMPLOYMENT APPLICATION



Please do not use "SEE RESUME" on any part of this application. All applicable information must be fully completed for consideration.

Merchants Information Solutions, Inc. is an equal opportunity employer. It is the policy of Merchants Information Solutions, Inc. to provide equal employment opportunities for all applicants and employees without regard to race, color, religion, national origin, sex, age, disability or citizenship status, or on the basis of any other classification protected by applicable federal, state or local law. Merchants Information Solutions, Inc. provides reasonable accommodations to individuals with disabilities. If you require an accommodation during the application process, please notify the Human Resources office.

PERSONAL INFORMATION			Application Date
Last Name	First Name	Middle Initial	Telephone Number
Present Address	No. and Street	City	State Zip Code

Can you, prior to employment, submit verification of your legal right to work in the United States? Yes No

Are you a High School Graduate Yes No
 Do you have a G.E.D.? Yes No

Are you 18 years of age or older? Yes No

EMPLOYMENT DESIRED

Are you currently employed? Yes No
 Do you seek full or part-time employment? _____

Position(s) applied for:

If so, may we contact your present employer? Yes No
 If part-time, hours available.

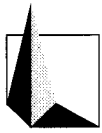
If you have ever worked for this company before, please indicate when and the position held.

If you have relatives employed by this company, please give names.

Please list any special skills, experience or qualifications related to the position applied for.

PREVIOUS EMPLOYMENT

	Please list most recent employment first	Company name, location and phone number	Position	Salary	Reason for Leaving
1	From To				
2	From To				
3	From To				



EDUCATION HISTORY

SCHOOL LEVEL	NAME AND LOCATION OF SCHOOL	SUBJECTS STUDIED/MAJORS
HIGH SCHOOL		
COLLEGE		
TRADE BUSINESS PROFESSIONAL SCHOOL		

PERSONAL REFERENCES

PLEASE LIST 3 NON-RELATIVES WHOM YOU HAVE KNOWN FOR AT LEAST ONE YEAR.

	NAME AND ADDRESS	TELEPHONE	RELATIONSHIP - YEARS KNOWN
1			
2			
3			

In Case of
Emergency
NOTIFY:

Name

Address

City

State

Zip Code

CONVICTIONS

Have you ever been convicted of a felony or, in the past two years, a misdemeanor which resulted in imprisonment? (Do not include minor traffic offenses). Yes No

If your answer is "yes," please provide the date of the conviction and describe the nature of the conviction on a separate form. Answering "yes" will not necessarily disqualify you from employment. Merchants Information Solutions, Inc. will consider the age and time of the offense, seriousness and nature of the violation and evidence of rehabilitation when considering your application for employment.

ABILITY TO PERFORM JOB FUNCTION

Can you perform the duties of the position for which you have applied, with or without a reasonable accommodation? Please answer this question after you have been informed about and understand the requirements of the job for which you have applied.

Yes

No

ADDITIONAL SKILLS

Please list any skills or abilities you have which you believe are relevant to the position for which you are applying, i.e., foreign language skills, proficiency in computer programs or software, etc.

AUTHORIZATION

I certify that the facts contained in this Employment Application (including my resumé or written materials I have submitted or caused to be submitted in connection with this Application and any statements made during my job interviews) are true, correct and complete to the best of my knowledge and belief.

I authorize Merchants Information Solutions, Inc. to make a thorough investigation of my present and previous employment, education and background in connection with its consideration of my Application. I authorize any person, agency, institution, company or other entity to give Merchants Information Solutions, Inc., or any party retained by Merchants Information Solutions, Inc., any and all information they may have, and I release all parties from liability for any damages that may result from furnishing any of this information to Merchants Information Solutions, Inc. I also indemnify Merchants Information Solutions, Inc. against any liability which might result from the investigation or inquiry it makes, or in connection with the information it receives.

I agree that if I am hired, my employment with Merchants Information Solutions, Inc. will be at-will, notwithstanding any other written representations contained in any other documents or any oral representations made by any person. I understand that this means that my employment is for no definite period and may, regardless of the date of payment of my wages or salary, be terminated by Merchants Information Solutions, Inc. or by me at any time, with or without cause, with or without prior notice, and without the payment of any additional compensation. I understand that if I am hired, my employment with Merchants Information Solutions, Inc. will continue only for as long as it desires my services. I understand that no representative of Merchants Information Solutions, Inc. has any authority to make any oral or implied agreement contrary to the foregoing, and that no course of conduct by Merchants Information Solutions, Inc. or its representatives will alter the at-will nature of my employment. I also understand that, if employed, the at-will nature of my employment can only be modified by an express written agreement specifically intended to modify the at-will nature of my employment and signed by an officer of Merchants Information Solutions, Inc.

Date: _____ Signature: _____

DO NOT WRITE BELOW THIS LINE

REMARKS

Hired	Dept.	Position	
Approved by:	Human Resources	Dept. Head	VP/Pres.
Schedule	Reporting Date		Salary/Wages

DISCLOSURE AND AUTHORIZATION STATEMENT

Merchants Information Solutions, Inc. (the "Company") will procure a consumer report and/or investigative consumer report on you for employment purposes.

The report will contain information bearing on your character, general reputation, personal characteristics, mode of living and credit standing. The types of information that may be obtained include but are not limited to: credit reports, social security number verification, criminal, court, educational and driving records checks, verification of employment positions held, personal, professional, licensing and certification checks, drug screening results, etc. The information in the report will be obtained from private and public record sources, including, as appropriate, personal interviews with sources, friends and associates.

You may request more information respecting the nature and scope of any investigative consumer report by contacting Alyssa Spitale.

AUTHORIZATION

I _____, have carefully read and the **Disclosure and Authorization Statement**. By my signature below, I consent to the release of consumer reports and investigative consumer reports prepared by a consumer reporting agency to the Company. I understand that if the Company hires me, my consent will apply throughout my employment.

I understand that information contained in my job application or otherwise disclosed by me before or during my employment, if any, may be used for the purpose of obtaining consumer reports or investigative consumer reports.

By my signature below, I also authorize the disclosure of information concerning my employment history, earnings history, education, credit history, credit capacity and credit standing, motor vehicle history and standing, criminal history, pre-employment drug screening results, and all other information deemed pertinent by the consumer reporting agency to the agency by the following: my past or present employers; learning institutions, including colleges and universities; law enforcement agencies; federal, state and local courts; the military; credit bureaus; and, motor vehicle records agencies.

Social Security #: _____ **Driver's License #:** _____

FOR IDENTIFICATION PURPOSES ONLY: Month & Day of Birth _____

Signature

Date

Para informacion en español, visite www.ftc.gov/credit o escribe a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave., N.W., Washington, DC 20580

**A SUMMARY OF YOUR RIGHTS
UNDER THE FAIR CREDIT REPORTING ACT**

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, DC 20580.**

- You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.

- You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

- ❑ **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.
- ❑ **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer agency may continue to report information it has verified as accurate.
- ❑ **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- ❑ **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- ❑ **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.ftc.gov/credit.
- ❑ **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.
- ❑ **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- ❑ **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.ftc.gov/credit.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

APPLICANT CONSENT FOR SUBSTANCE
ABUSE TESTING

I, _____ (*applicant name*), upon receipt of a formal job offer (verbal or written), do hereby agree to submit to testing to be performed by Quest Laboratories for detection of drugs and alcohol. I give permission for test results to be released to Merchants Information Solutions, Inc.

I understand that positive test results, refusal to be tested, delay of testing (*must be completed within 72 hours of offer*) or any attempt to affect the test results or test sample will result in withdrawal of my application for employment, withdrawal of any provisional employment offer I have received from Merchants Information Solutions, Inc. or termination of employment, depending on when results are received.

Applicant Signature _____

Printed Name _____

Social Security Number _____ - _____ - _____

Date ____ / ____ / ____

EMPLOYMENT INFORMATION

Merchants Information Solutions, Inc. performs a job history verification on all potential applicants as part of its application process. Please provide the following information and sign below as a release of permission to use said information and contact your current or previous employer(s). Please provide the name of the person that would be best able to verify employment along with their phone number.

GENERAL:

Full Name (Including Middle): _____

Nick Names: _____

Social Security Number: _____ - _____ - _____

EMPLOYMENT:

May we contact your current employer?

Yes

No

1. Previous Employer: _____

Contact Name: _____

Phone Number (with area code): _____

2. Previous Employer: _____

Contact Name: _____

Phone Number (with area code): _____

3. Previous Employer: _____

Contact Name: _____

Phone Number (with area code): _____

Print Name

Date

Signature

Our hiring policy is simple:

WE FOLLOW THE LAW!

This company hires lawful workers only – U.S. citizens or nationals and non-citizens with valid work authorization – without discrimination.

Federal immigration law requires all employers to verify both the identity and employment eligibility of all persons hired to work in the United States.

In its efforts to meet the law's requirements, this company is participating in the Basic Pilot program established by the Department of Homeland Security and the Social Security Administration (SSA) to aid employers in verifying the employment eligibility of all newly-hired employees. Our participation in the pilot program does not exempt us from the obligation to complete a Form I-9 for everyone we hire.

For additional information on the verification program contact the:

Department of Homeland Security
USCIS/SAVE Program
111 Massachusetts Avenue, 2nd Floor
Washington, DC 20001
Phone (888) 464-4218