

Statement of Acknowledgment and Release

- In connection with my application for employment with BPMI, I authorize BPMI to disclose to the government any personal information which it receives from third parties, including, but not limited to, matters relating to my past employment, education background, criminal record, and credit history. I voluntarily waive all recourse and release BPMI from any liability arising under this disclosure. I understand that any verbal authorization made by me prior to the execution of this authorization will be considered effective and valid to the extent it does not conflict with this acknowledgment and release.
- It is the policy of BPMI to provide a safe and healthy workplace and workforce by assuring, to the extent
 practicable, a work environment free of alcohol and other drugs. Substance use (with the exception of
 prescribed drugs taken in prescribed doses) or abuse is prohibited in the workplace and workforce and will
 not be tolerated. As used in this acknowledgment and release, a substance is defined as an illegal drug,
 controlled drug (i.e. prescribed drug), and/or alcohol.
- I understand, authorize, and consent that, as a condition of employment, substance use screening will be conducted, and I understand that employees must submit to these screenings upon request. I recognize that refusal to participate in the screening program will preclude my hire. I understand that employment offers are contingent upon obtaining a "negative" result from the substance screening. I understand that, as a condition of being employed or remaining in the employment of BPMI, any use, possession, or passing of substances, or conspiring to do so, can result in my immediate discharge. I understand that as an employee, refusal to participate in the screening program will result in disciplinary action up to and including discharge.
- I understand that, in order to work at BPMI, I must be granted a security clearance by the U.S. Government.
 I agree that my response on the Applicant Acknowledgment must and will be truthful, and I understand that a false statement may be grounds for an adverse employment action.
- I understand that BPMI may require a new hire physical examination be conducted.
- I understand that it is the continuing policy of BPMI to afford equal employment opportunity to qualified
 individuals, in conformance with applicable laws and regulations, regardless of their race, color, religion, sex,
 national origin, age, physical or mental disability, veteran or disabled veteran status.
- I understand that falsification of information rendered in connection with my application for employment can
 result in immediate separation from employment with BPMI, at any time, regardless of when it was
 discovered.

Signature	Today's Date	
Print Full Name (First Middle Last)		



Applicant Acknowledgment

Have you ever been convicted of a crime? Yes No
Please include felonies and misdemeanors.
If yes, please provide city and state of conviction, and specific details of conviction. A conviction may no necessarily disqualify you from employment. The nature of the offense, date of the offense, the surrounding circumstances, and the relevance of the offense to the position, and all other appropriate circumstances will be considered.
Certification/Signature:
I certify that my responses above are current and truthful and I understand that a false statement may be grounds for an adverse employment action, at any time, regardless of when discovered.
Signature Today's Date
Print Full Name (First Middle Last)

Consumer Report Disclosure

Bechtel Plant Machinery, Inc. (BPMI) intends to obtain and use a consumer report and an investigative consumer report for employment purposes. These purposes may include, but are not limited to:

- 1. considering your application for employment
- 2. making a decision whether to offer you employment with the company
- 3. deciding whether to continue your employment (if you are hired by the company)
- 4. making any other employment decisions affecting you
- 5. providing this information to the government for the purposes of a security clearance initially, and following hire.

As an applicant or employee, you are considered a "consumer" under the Fair Credit Reporting Act. A consumer report may include information about your character, general reputation, personal characteristics, or mode of living, which is used or collected for employment purposes. An investigative consumer report also involves personal interviews with sources such as employers, educators, references, etc.

You have a right to request disclosures of the nature and scope of any investigative consumer report that the company obtains about you by contacting BPMI. You also have other rights under the Fair Credit Reporting Act. For a summary of your rights, please go to:

https://www.justifacts.com/pdfs/Applicant_Summary_Rights.pdf

You have the right to dispute any information contained in the reports by contacting Justifacts Credential Verifications at 800-356-6885 or disputes@justifacts.com within 5 days of receipt of the reports. Note: Justifacts does not make or know the reason for any employment decisions.

I hereby acknowledge receipt of this disclosure and that Bechtel Plant Machinery, Inc. may obtain consumer reports and investigative consumer reports about me, and that they may consider information in the reports as part of their decision making process regarding any aspect of my application for employment or continued employment. I also acknowledge that I have received a copy of the Summary of Rights under the Fair Credit Reporting Act.

I understand if any adverse action is taken against me due to the information contained in the reports, I will receive a copy of the report and a summary of my rights in accordance with the Fair Credit Reporting Act.

Signature	Today's Date
Print Full Name (First Middle Last)	_

Applicant Authorization and Release

- 1. I understand, authorize, and consent to Bechtel Plant Machinery, Inc. (BPMI) or its agents now or at some future date conducting such investigations into matters related to my character, general reputation, conduct, personal characteristics, employment history, credit history, criminal record, etc., in order that my application for employment may be more fully evaluated. I authorize all schools, former employers, references, other organizations, and persons to release any and all information in their possession to the above organization. If such inquiry is made, the nature and scope will be made known to me upon written request. I authorize appropriate authorities to conduct audits of information developed by such investigations. I understand and agree that this information may be obtained for employment purposes as part of the pre-employment background investigation and at anytime during my employment. If hired, I understand that this authorization shall remain on file and shall serve as an ongoing authorization to procure reports at any time during my employment with BPMI.
- 2. If applicable, medical and worker's compensation information will only be requested in compliance with the federal Americans with Disabilities Act (ADA) and/or any other applicable state laws.
- 3. I acknowledge that a fax or a photographic copy of this release shall be as valid as the original.
- 4. I hereby authorize, without reservation, any financial institution, law enforcement agency, information service bureau, school, employer, insurance company, any other agency, organization, or person contacted by BPMI or its agents to furnish the information described in Section I.
- Notice to New York Applicants By signing below, you acknowledge receiving a copy of Article 23-A of the New York Correction Law, governing the licensure and employment of persons previously convicted of one or more criminal charges.

Complete the Following to Indicate Agreement with the Above:				
Print Full Name (First Middle Last)	Signature	Today's Date		
The following information is required by law public records. It is confidential and will not		es for positive identification purposes when checking		
Print Other Name(s) You Have Used	Dates Others Names Have Beer	n Used		
Home Address	City, State	Zip Code		
Date of Birth	Social Security Number			