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Welcome
Please enter your Personal Information in the fields below to gain access and begin the Reference Check process. Process will take 5-15 minutes depending on your responses to the 16 questions. You will need to upload a copy of your driver's license or another form of ID for verification.

First Name:*	<input type="text" value="ERIC"/>
Last Name:*	<input type="text" value="AUDISH"/>
Email:*	<input type="text" value="info@usachecknow.com"/>

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Welcome ERIC AUDISH

Step 2 of 7

You have been chosen as a Reference. Our online system will provide you with 16 questions to answer about the applicant. If the question does not apply to you insert N/A. If you have any questions please contact us. 800-259-6959 Please note you will be required to upload a form of identity for verification purposes only.

1: Electronic Signature Confirmation

For your ease and convenience and to expedite the Reference Check process, we have made our application and/or our Disclosure and Authorization to perform a reference check available for completion online.

2: Disclosure and Authorization for a Background Check

As part of the Reference Check process, you will be asked to complete and electronically sign a disclosure and authorization allowing the company to contract with a third party consumer reporting agency, The Audi Group, LLC, to conduct the Reference Check.

3: Completion of the Reference Check (if applicable)

You will be asked to fully complete the questions to the best of your knowledge.

ESIGN Act Disclosure and Consent

Pursuant to the Electronic Signatures in Global and National Commerce Act ("ESIGN Act") and the Uniform Electronic Transaction Act (UETA) the following ESIGN Act Disclosure and Consent explains how the background screening process (REFERENCE CHECK) will be conducted electronically by The Audi Group. After reviewing this Disclosure and Consent you can agree to proceed electronically by clicking the "I agree" button below. If you do not wish to proceed electronically, click "I do NOT agree" and you will be provided with further instructions.

Electronic Delivery of Disclosures, Notices and Letters

- By operating in an electronic environment you agree to access, sign, and submit documents necessary to complete the reference check.

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I hereby consent to the Fair Group to complete the reference check. I understand to aid in the hiring process I will answer the questions about the applicant to the best of my ability.

I understand that I am being provided the "Summary of Your Rights Under the Fair Credit Reporting Act" prepared pursuant to 15 U.S.C. Section 1681-1681.

This Disclosure and Authorization form, in electronic, faxed, or photocopied form, will be valid for any reports that may be requested by the Company.

✓ By checking this box, I affirm that I have read and agree to the Disclosure Regarding Background Investigation.*

SIGNATURE

I understand that my Electronic Signatures will be binding as though I had physically signed these documents by hand. I agree that a printout of this authorization may be accepted with the same authority as the original.

First Name:*

ERIC

Middle Name:

Last Name:

AUDISH

Date (mm/dd/yyyy):*

6/5/2021

Candidate's/Applicant's Signature :*

ERIC AUDISH

I Agree I Don't Agree

By selecting 'I Don't Agree' your reference check may be delayed or canceled.

Print / Save Disclosure

Submit

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✓ By checking this box, I affirm that I have received my FCRA Summary of Rights Above.*

SIGNATURE

I understand that my Electronic Signatures will be binding as though I had physically signed these documents by hand. I agree that a printout of this authorization may be accepted with the same authority as the original.

First Name:* ERIC

Middle Name:

Last Name: AUDISH

Date (mm/dd/yyyy):* 6/5/2021

Candidate's/Applicant's Signature :* ERIC AUDISH

I Agree I Don't Agree

By selecting 'I Don't Agree' your reference check may be delayed or canceled.

Print / Save Summary Of Rights

Submit

This system is for authorized users only. All activities on this system may be monitored and/or recorded by The Audi Group, LLC's security personnel.
Unauthorized use is strictly prohibited.

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Personal Information

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Confidential Background Information

PII / Document Management

Agreement

The Audi Group is an Equal Opportunity Employer. No employee or applicant for employment will be discriminated against because of race, color, religion, age, national origin, sex, disability, marital status, veterans' status or the presence of a non-job related medical condition or disability or any other legally protected status in compliance with federal and state equal employment opportunity laws. (Note: The employer is exempt from the religious provision of the Civil Rights Act of 1964 if employer is a religious organization, per Title VII.) Please note the following information will be used by The Audi Group, LLC, a consumer reporting agency, for background screening purposes only.

Position Applied For
Position: REFERENCE
Job Description:
REFERENCE CHECK
6/5/2021

PERSONAL INFORMATION SECTION

*Please complete the entire reference check. All fields with * are required.*

Name : ERIC AUDISH

Current Address * :

City * :

State * :

Zip * :

Home Phone * :

Work Phone:

Cell Phone:

E-mail Address * :

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What is your relationship with applicant? *

How long have you known the applicant? *

What are the applicant's strengths? *

What are the applicant's weaknesses? *

How does the applicant react in stressful situations? *

Are there any situations in which you would avoid
placing the applicant? *

Does the applicant work better individually or in a
group environment? *

Would you hire the applicant to work for you? *

What comments or suggestions would you have for the
applicant's new supervisor? *

Define your Role in relation with the subject during their

Agreement

Date of Birth :

DOCUMENT MANAGEMENT

Upload a copy of your driver's license or another state/government ID. This is verify your identity and will not be used for any other purpose. Please click the "Browse" button below to browse for the file that you would like to attach to this order. Note: You are required to select at least one valid file and enter an associated description to successfully complete the attachment process and submit the form.

[Click Here to Upload Files Associated with this Applicant](#)

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[Print this Reference Check](#)

[I Disagree](#)

[I Agree / Submit](#)

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