

PERSONAL RELEASE AND CONSENT FORM

(PLEASE PRINT NEATLY)



(BACKGROUND INVESTIGATION QUESTIONNAIRE AND RELEASE)

PERSONAL INFORMATION

				DATE	_____
NAME:					
LAST		FIRST		MIDDLE	
SOCIAL SECURITY #:		DRIVERS LICENSE #:		STATE:	
PRESENT ADDRESS:					
STREET		CITY		STATE ZIP	
PHONE NO:					

OTHER NAMES USED (ie: maiden name, names from former marriages, or aliases. Include the dates when used.)

NAME:	DATE:	NAME:	DATE:
NAME:	DATE:	NAME:	DATE:

RESIDENTIAL ADDRESS (Start with current address and work backwards 10 years. Use a separate sheet, if necessary)

Month/Year	Month/Year	Street Address
(From)	(To)	(Include City, State, and ZIP Code)

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I hereby authorize Alltech International Inc. or it's agents to verify, at any time, the following information:

- Present and previous employment information including salary as well as work performance
- Past and present driving records
- Education records
- Credit history
- Professional credentials
- Criminal background check
- DOD Clearances
- Business and Personal references
- Anything listed on my application

I also understand that employment may be contingent upon passing a drug-screening test and that my continued employment may be based on the results of future drug screening tests and/or any other future random background checks.

Further, I authorize my current and former employers, as well as other organizations to provide such information to Alltech International Inc. and I hereby release and hold harmless Alltech International Inc., my current and former employers and persons named in my application from any and all liability and any damages on account of his/her furnishing said information. I also understand that misrepresentation or omission of facts is cause for rejection of employment and/or dismissal.

SPECIAL QUESTIONS - FOR BACKGROUND INVESTIGATION

DO NOT ANSWER ANY OF THE QUESTIONS IN THIS FORM AREA UNLESS THE EMPLOYER HAS MARKED THE SQUARE PRECEDING A QUESTION THEREBY INDICATING THAT THE INFORMATION IS REQUIRED FOR A BONA FIDE OCCUPATIONAL QUALIFICATION OR DICTATED BY NATIONAL SECURITY LAWS, OR IS NEEDED FOR OTHER LEGALLY PERMISSIBLE REASONS.

<input checked="" type="checkbox"/>	PLACE OF BIRTH	_____	<input checked="" type="checkbox"/>	CITIZEN OF U.S.	YES	NO
<input checked="" type="checkbox"/>	ELIGIBLE TO WORK IN US	_____	<input checked="" type="checkbox"/>	DATE OF BIRTH	_____	

* THE AGE DISCRIMINATION ACT OF 1967 PROHIBITS DISCRIMINATION ON THE BASIS OF AGE WITH RESPECT TO INDIVIDUALS WHO ARE AT LEAST 40 BUT LESS THAN 70 YEARS OF AGE.

DATE _____ SIGNATURE _____

THIS FORM HAS BEEN DESIGNED TO COMPLY WITH STATE AND FEDERAL FAIR EMPLOYMENT PRACTICE LAWS PROHIBITING DISCRIMINATION ON THE BASIS OF AN APPLICANT'S SEX OR MINORITY STATUS. QUESTIONS DIRECTLY OR INDIRECTLY REFLECTING SUCH STATUS HAVE BEEN INCLUDED ONLY WHERE NEEDED TO DETERMINE A BONA FIDE OCCUPATIONAL QUALIFICATION OR FOR OTHER PERMISSIBLE PURPOSES. SUCH QUESTIONS ARE APPROPRIATELY NOTED ON THE APPLICATION. ALSO, IN ACCORDANCE WITH THE FAIR CREDIT REPORTING ACT, ALLTECH WILL PROVIDE A COPY OF THE "CONSUMER REPORT" AND APPROPRIATE DOCUMENTATION IF THE CONSUMER REPORT IS THE BASIS FOR "ADVERSE ACTION".