

**SECTION 603(X) FAIR CREDIT REPORTING ACT
DISCLOSURE STATEMENT REGARDING
DRIVER LICENSE REPORTS**

FOR JOB APPLICANTS: In conjunction with my application for employment with the prospective employer named above that will require the operation of motor vehicles on public roads or for my continuation of employment, I understand that this employer intends to obtain information concerning my driver's license record from the state which issued my current driver's license at time of hire and regularly during my employment.

FOR JOB APPLICANTS AND CURRENT EMPLOYEES: By signing below, I acknowledge having read the following disclosure, and I hereby authorize this employer (or its authorized agents) to obtain the above referenced information. Further, if I am hired or if I am already employed by this employer, this authorization shall remain on file with the employer and shall serve as an ongoing authorization for this employer to obtain this information about me any time during my employment. Any copy of this authorization shall be as valid as the original.

I also agree that any and all disputes arising from the prospective employer's use of this information shall be brought only in state or federal court in the Commonwealth of Pennsylvania, and shall be governed by, and construed in accordance with, the laws of the Commonwealth of Pennsylvania.

DISCLOSURE: I understand that this employer may use the information provided by such state agency in determining whether (1) to offer employment to me pursuant to Section 604 of the federal Fair Credit Reporting Act, or (2) to continue employment based on the findings of such report. I further understand that, if this prospective employer takes any adverse action (such as not offering me employment) based in whole or in part on this information, the prospective employer shall provide me a copy of the report containing the information obtained from the applicable state driver's license agency, including:

1. The name, address, and telephone number of the state agency that provided the report;
2. A statement that the state agency in question did not make the adverse decision and is not able to explain why the adverse decision was made;
3. A statement setting forth the applicant's right to obtain a free disclosure of the applicant's file from the state agency if the consumer makes a written request within 60 days; and,
4. A statement setting forth the applicant's right to dispute directly with the relevant state agency the accuracy or completeness of any information provided by such state agency.

Print Employer Name: _____

Print Applicant/Employee Name: _____

Applicant/Employee Signature: _____

State Which Issued Driver's License: _____

Today's Date: _____

Note: This original form must be permanently maintained in this employee's personnel file.