



Acknowledgment and Authorization

For Consumer Reports

In connection with your application for employment with RDM Group, Inc. t/a Health Unlimited, you understand that consumer reports or investigative consumer reports may be requested about you including information about your character, general reputation, personal characteristics and mode of living, employment record, education, qualifications, criminal record, driving record, credentials, and may involve personal interviews with sources such as supervisors, friends, neighbors, associates, public record or various Federal, State or Local agencies.

You hereby authorize the obtaining of such consumer reports and investigative consumer reports for RDM Group, Inc. t/a Health Unlimited and any other company with which they contract for your services. By signing below, you hereby authorize without reservation, any party or agency contacted by this employer, or the consumer reporting agency acting on behalf of the employer, to furnish the above-mentioned information. You further authorize ongoing procurement of the above-mentioned reports at any time during your continued employment or contract for services. You also agree that a fax or photocopy of this authorization with your signature shall be accepted with the same authority as the original.

For California, Minnesota, or Oklahoma applicants only, if you would like to receive a copy of the consumer report, if one is obtained, please check this box.

For California applicants only, if public record information is obtained without using a consumer reporting agency, you will be supplied a copy of the public record information unless you check this box waiving your right to obtain a copy of the report.

Printed Name: _____

Signature: _____

Date: _____

Social Security #: _____

Date of Birth: _____

Maiden Name (if applicable) _____

Current Address: _____

_____ City State Zip

DL# _____ State: _____

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