

1. Link will take you to the LEGION-AIRES DRUM AND BUGLE CORPS Volunteers page. This is the legal name of the Colts Youth Organization.

one source
The Background Check Company

orders@onesourcebackground.com

TotalCheck.

**LEGION-AIRES DRUM AND BUGLE CORPS
Volunteers**

Please read all instructions before completing this form!

The following information may be required by law enforcement agencies, local, state or federal governmental agencies or similar public bodies for positive identification purposes when checking public records. I understand that this information is confidential and will only be used for background screening purposes.

According to the Fair Credit Reporting Act you are to be provided with a copy of your rights according to the FCRA. Please click here for the [Summary of Consumer Rights According to the FCRA](#).

Email One Source with any special notes/comments regarding this applicant at: orders@onesourcebackground.com.

Select **ENTER ORDER** to proceed to next screen.

Questions? Contact One Source at 402.933.9999 or 1.800.608.3645.
Thank you!

First Name Enter full LEGAL first name. Do NOT enter nicknames or abbreviations.

2. Read the instructions to the right as you fill in the information. Do not complete the "Department", "Recruiter" or "Position Applied For" information. Select "NEXT" to proceed to next screen.

<p>First Name <input type="text"/></p> <p>Middle Name <input type="text"/></p> <p>Last Name <input type="text"/></p> <p>Suffix <input type="text"/></p> <p>Street Address <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/></p> <p>Zip Code <input type="text"/></p> <p>Country Code <input type="text" value="US"/></p> <p>Request Copy ? <input type="text" value="NO"/></p> <p>SSN <input type="text"/></p> <p>Birth Date (DOB) <input type="text"/></p> <p>Drivers License Number <input type="text"/></p> <p>Issuing State <input type="text"/></p> <p>Department <input type="text"/></p> <p>Recruiter <input type="text"/></p> <p>Position Applied For <input type="text"/></p> <p>Phone Number <input type="text"/></p> <p>Email Address <input type="text"/></p>	<p>Enter full LEGAL first name. Do NOT enter nicknames or abbreviations.</p> <p>Enter middle name or initial. Do NOT enter nicknames.</p> <p>Enter full legal last name. Do NOT enter nicknames or abbreviations.</p> <p>Enter suffix if applicable. EXAMPLE: Jr., Sr., III</p> <p>Enter full street address.</p> <p>Please change if US is not the correct Country Code.</p> <p>For CA, MN, and OK residents, would you like a copy of the report emailed?</p> <p>Enter social security number. Do not enter hyphens or dashes. EXAMPLE: 111223333</p> <p>Enter date of birth. Do not enter hyphens or dashes. EXAMPLE: 12101970</p> <p>Enter Drivers License Number.</p> <p>Enter Drivers License Issuing State.</p> <p>Department would be provided by HR Department.</p> <p>Recruiter would be provided by HR Department.</p> <p>Enter a phone number the applicant can be reached at between 8 am and 5 pm.</p> <p>Enter an email address. REQUIRED for eSignature on release.</p>
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NEXT

3. Select **"SIGN General Release"** to authorize background check.

Applicant ID: 201705182000350
Applying for the position of [Redacted] at 5053V
SSN: [Redacted] Birth Date: [Redacted]
Email Address: [Redacted] Phone Number: 6512003669

General Release **SIGN General Release** (Click only once - this may take a few seconds.)

CATEGORY	APPLICANT DATA	REQUIRED DATA
SSN	[Redacted]	Complete
Court	Federal Criminal US	Complete
Court	Statewide Criminal MN	Complete
Court	Global Report Global Report	Complete
Court	Nationwide Criminal US Nationwide Criminal	Complete
Court	Sex Offender Sex Offender Registries	Complete

ORDER CONFIRMATION

CATEGORY	SERVICES	AMOUNT
Package	Total Check v3.0 Symonik, William Edmund	

4. If you agree to the the *Terms of Use* and you reviewed the *Consumer Disclosure*, check the box and select "Accept".

Consent to do business electronically

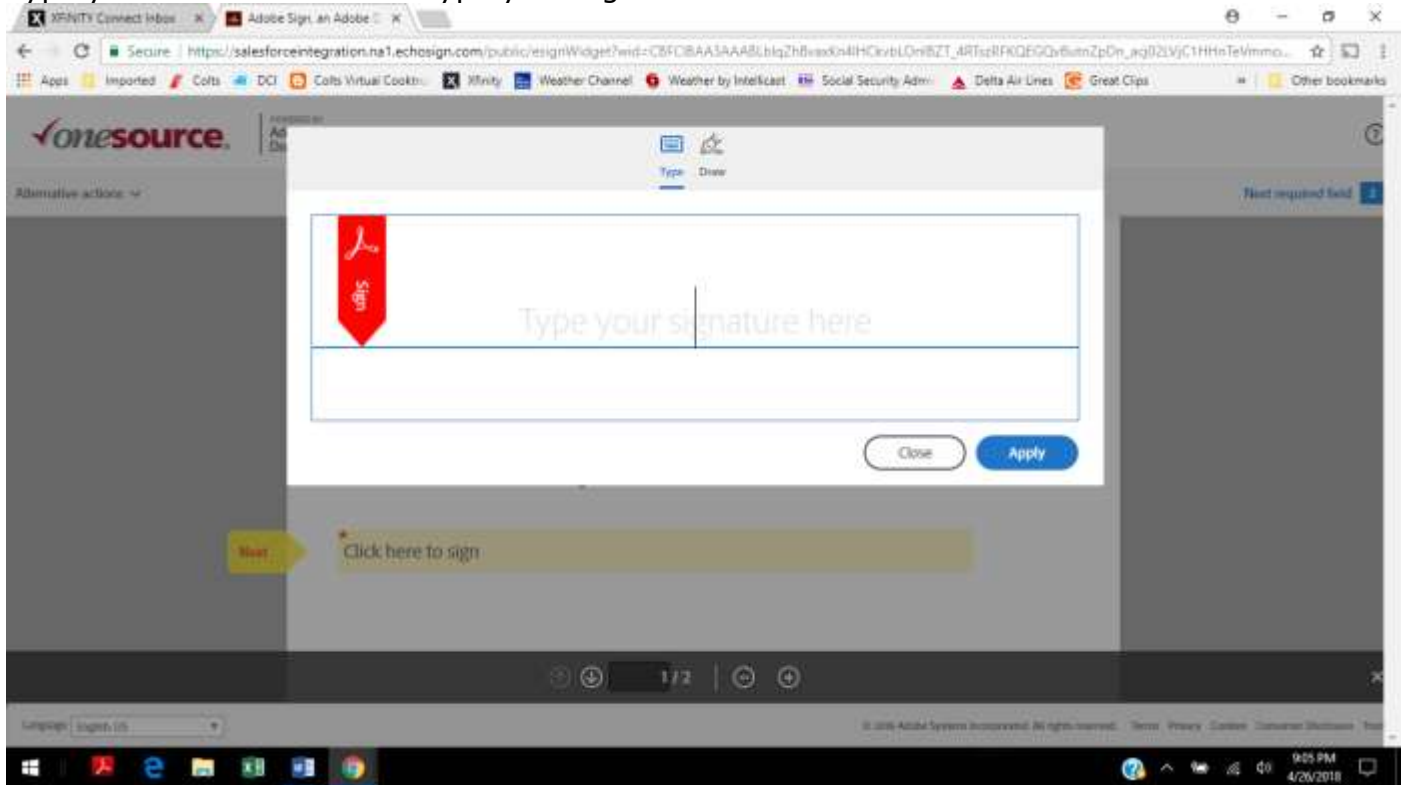
From: One Source
Document: Additional Documentation from OneSource

I agree to the Terms of Use, have reviewed the Consumer Disclosure and agree to do business electronically with onesourcebackground.com

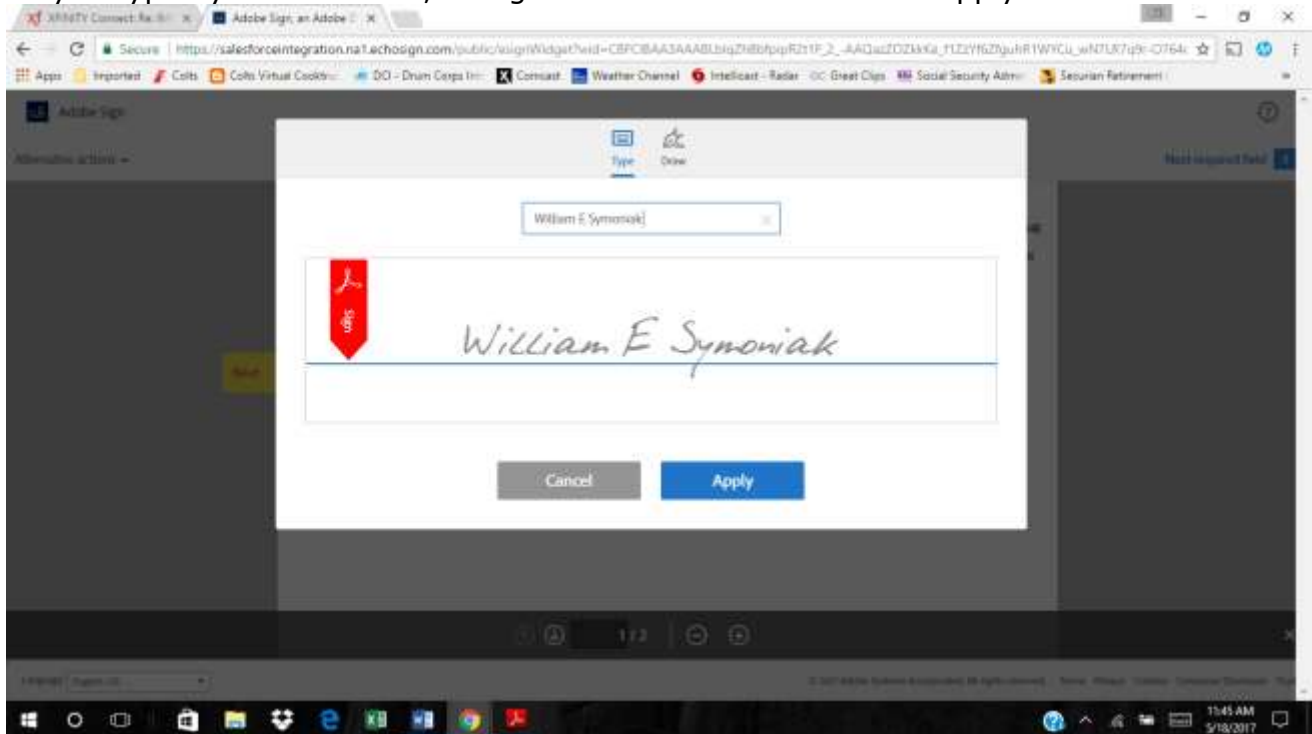
Accept

5. Read the Disclosure, Acknowledgment and Authorization paragraphs. Select **"*Click here to sign"**.

6. Type your full name in the "Type your signature here" box.



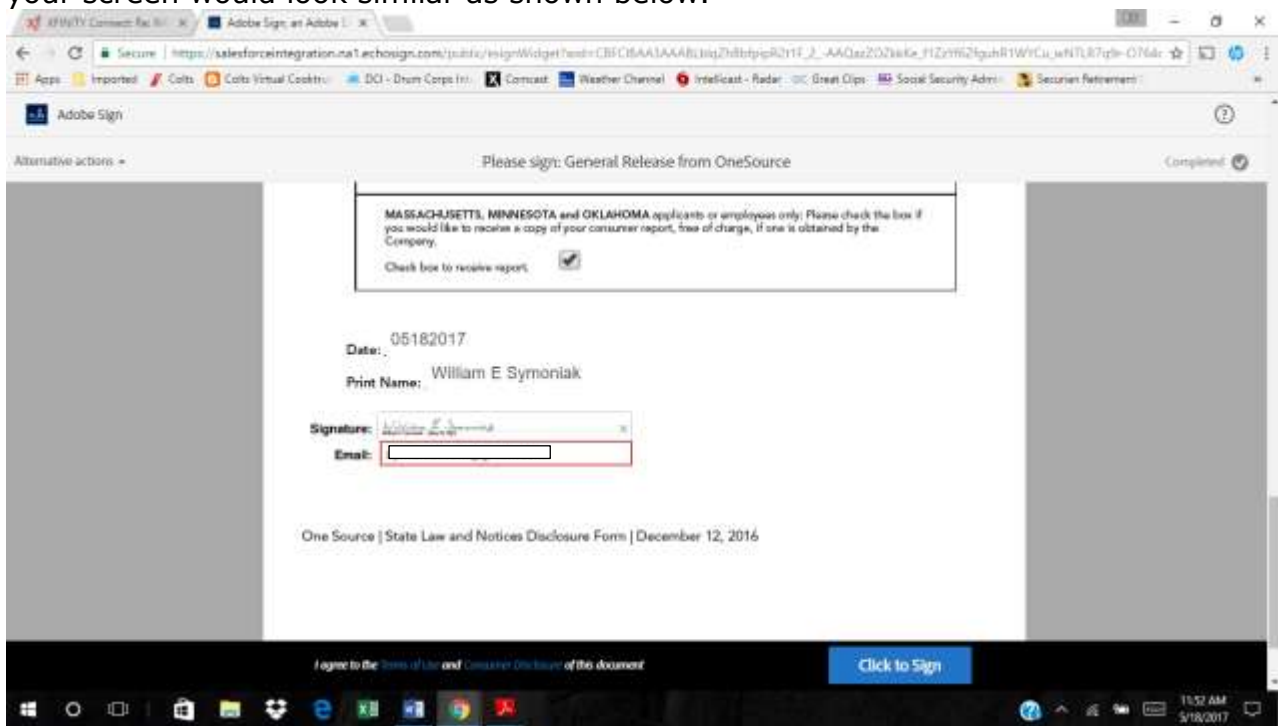
7. As you typed your full name, a "signature" is created. Select "Apply".



8. Signature now appears on page 1. Scroll to page 2 for additional notices and disclosures based on your state of residence. If you are **NOT** a resident of California, New York, Washington, Massachusetts, Minnesota or Oklahoma, go to step 11.

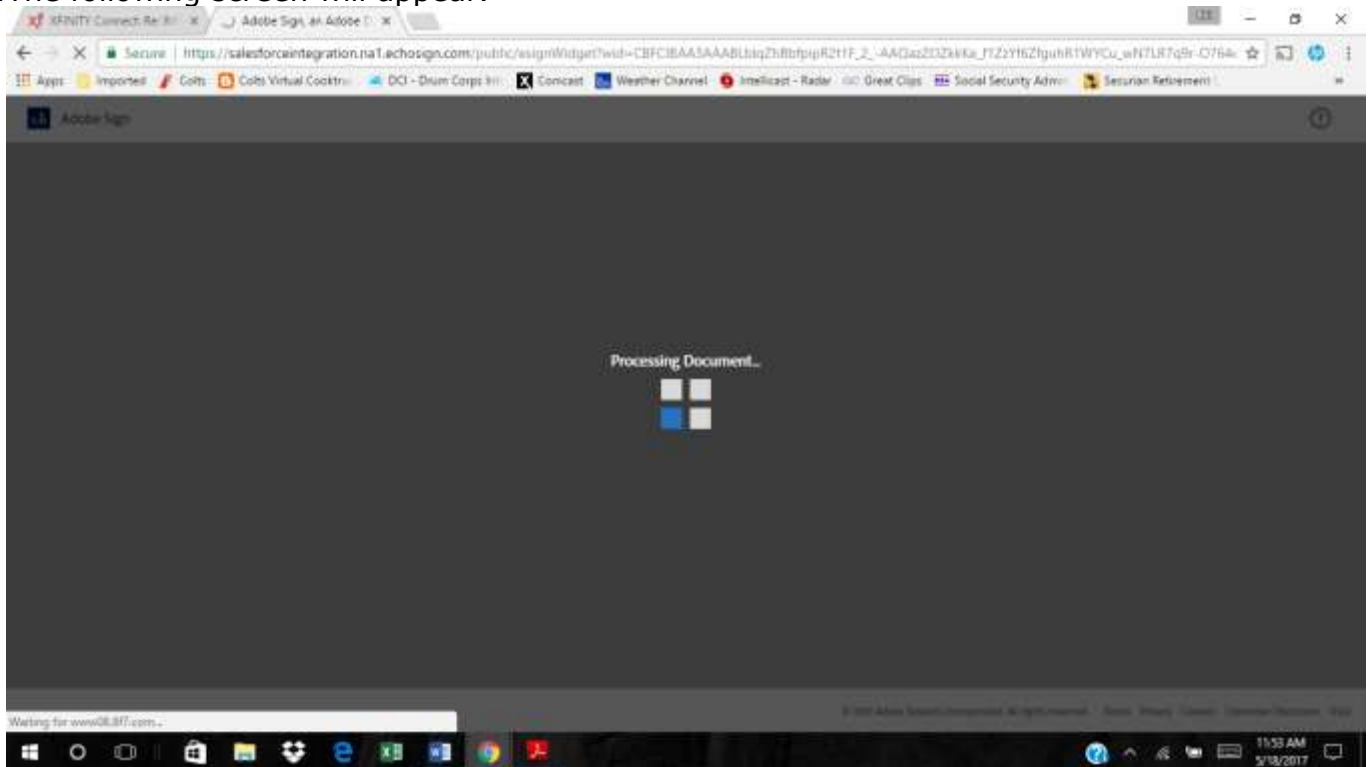
9. If you **ARE** a resident of New York or Washington, read the applicable notice and go to step 11 .

10. If you **ARE** a resident of California, Massachusetts, Minnesota or Oklahoma, read the applicable notice. If you checked the box to receive a report based upon your state of residence, follow the prompts for date, name and signature. After completing the prompts, your screen would look similar as shown below.



11. Select "Click to Sign" in the blue box at the bottom to continue.

12. The following screen will appear.



13. It may take a short while to process the document before returning to this screen:

California applicants only: Click the link to view the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW - California Notice.
New Jersey applicants only: Click the link to view the New Jersey State Summary of Rights.
New York applicants only: Click the link to view the New York Correction Law Article.
Washington applicants only: Click the link to view the Washington State Summary of Rights.

To complete your order, read **DISCLOSURE AND AUTHORIZATION** and select I agree located at the bottom this screen and then click on ENTER ORDER.

UPLOAD DOCUMENTS (.gif, .jpg, .png, .pdf, .tif only)		
General Release	SIGNED	
ENTER ADDITIONAL DATA		
CATEGORY	APPLICANT DATA	REQUIRED DATA
SSN	<input type="text"/>	Complete
Court	Federal Criminal US	Complete
Court	Statewide Criminal MN	Complete
Court	Global Report Global Report	Complete
Court	Nationwide Criminal US Nationwide Criminal	Complete
Court	Sex Offender Sex Offender Registries	Complete

[Add a New Service Entry](#)

ORDER CONFIRMATION		
CATEGORY	SERVICES	AMOUNT
Package	Total Check v3.0 Symoniak, William Edmund	

By selecting the I Agree button and pressing the Enter Order button you are authorizing Consumer reports and/or investigative consumer reports. I agree that a facsimile (fax), electronic or photographic copy of the Authorization shall be as valid as the original.

I agree
 I do NOT agree

DELETE ORDER

14. Elect "I agree" and the "DELETE ORDER" will change to "ENTER ORDER". Select "ENTER ORDER".

California applicants only: Click the link to view the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW - California Notice.
New Jersey applicants only: Click the link to view the New Jersey State Summary of Rights.
New York applicants only: Click the link to view the New York Correction Law Article.
Washington applicants only: Click the link to view the Washington State Summary of Rights.

To complete your order, read **DISCLOSURE AND AUTHORIZATION** and select I agree located at the bottom this screen and then click on ENTER ORDER.

UPLOAD DOCUMENTS (.gif, .jpg, .png, .pdf, .tif only)		
General Release	SIGNED	
ENTER ADDITIONAL DATA		
CATEGORY	APPLICANT DATA	REQUIRED DATA
SSN	<input type="text"/>	Complete
Court	Federal Criminal US	Complete
Court	Statewide Criminal MN	Complete
Court	Global Report Global Report	Complete
Court	Nationwide Criminal US Nationwide Criminal	Complete
Court	Sex Offender Sex Offender Registries	Complete

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I agree
 I do NOT agree

ENTER ORDER

15. The following screen will appear and confirm your order has been entered.



16. You will receive an email at the address you specified containing a copy of your signed Disclosures and Authorization form.