



101 Queen City Park Road
Burlington, VT 05401

802-540-2468 | RideGMT.com

VOLUNTEER DRIVER APPLICATION

Applicant Information

Name _____ Date of Birth _____
Street Address _____
Town / City _____ Zip Code _____
Mailing Address _____
Town / City _____ Zip Code _____
Cell Phone # _____ Home Phone # _____
How long have you been a resident of Vermont? _____
Do you currently have a valid Vermont drivers license? _____
Valid Vermont drivers license # _____

Vehicle Information

Is your vehicle owned or leased? _____ Year of Vehicle _____
Vehicle Make _____ Model _____ Color _____
License Plate # _____ 2 or 4 Door _____
Is the vehicle currently registered? _____ Is the vehicle inspection current? _____
Vehicle Insurance Company & Agent _____
Vehicle Insurance Company Phone # _____
Type & Amount of Vehicle Insurance _____
Current Insurance Policy # _____

Applicant History

Have you ever been in an automobile accident? _____
Have you ever been cited for a traffic violation? _____
Have you ever been accused or convicted on a crime? _____
If yes, please explain: _____

Have you ever been interviewed or investigated by the Department of Children and Families (DCF) Family Services Division or the police for child abuse, senior abuse and / or neglect? _____

If yes, please explain: _____

Driving References

Are you comfortable driving in winter snow conditions? _____

Are you able to drive during dusk / dawn and night hours? _____

Are you able to assist a passenger to and from the vehicle? _____

Are you able to assist a passenger with a wheelchair or a walker? _____

Are you willing to travel long distance? (For example, to Burlington, VT, Hanover, NH, and St. Johnsbury, VT.) _____

Public Interest Information

Please briefly describe why you wish to be a GMT volunteer driver: _____

How did you learn about the GMT volunteer driver program? _____

If you are 55 years of age or older, you are eligible for the Retired and Senior Volunteer Program (RSVP) membership. It may offer additional insurance options. Are you currently a member? _____

If no, are you interested in becoming a RSVP member? _____

Applicant Authorization

For the safety and well being of all GMT clients and staff, GMT requires that all potential GMT volunteer drivers agree to the following: I hereby grant Chittenden County Transportation Authority dba Green Mountain Transit, permission to contact the references I have given below and also grant such references permission to speak truthfully and in detail about me.

REFERENCES: Please provide the names, daytime telephone numbers and mailing addresses of three (3) references who are not related to you.

1. Name _____
Day Phone _____
Mailing Address _____

2. Name _____
Day Phone _____
Mailing Address _____

3. Name _____
Day Phone _____
Mailing Address _____

I hereby grant Chittenden County Transportation Authority dba Green Mountain Transit, permission to investigate my personal history through any investigative agencies or bureaus of their choice in order to obtain verification in the following: Adult Abuse Registry, Child Abuse Registry, Vermont Criminal Record Check, National Criminal Record Check, Motor Vehicle Inspection, Driver License Check.

Signature _____ Date _____

Name (printed) _____

Thank you for supporting GMT and the communities we serve. If you wish to volunteer, please e-mail or mail your GMT Volunteer Driver Application, along with a copy of your picture ID to:

Central Vermont

E-Mail: CGilbert@RideGMT.com

Mail: GMT Attn. Cynthia Gilbert
6088 VT Route 12
Berlin, VT 05602

Northern Vermont

E-Mail: MDonna@RideGMT.com

Mail: GMT Attn. Mari Donna
375 Lake Road, Suite 3B
St. Albans, VT 05478



AND

Child Abuse Registry Unit, 280 State Drive, HC 1 North Bldg. B, VT 05671-2401

This form is for use with the ON-LINE registry checking system ONLY

Current or Prospective Employee, Contractor, or Volunteer Information

**VERMONT CRIMINAL INFORMATION CENTER
VULNERABLE POPULATIONS PROGRAM
RELEASE FORM**

Qualified Entity	Green Mountain Transit		
Applicant	Last	First	Middle
Maiden or Alias Names			
Social Security #			
Place of Birth	City/Town	State	Country
Date of Birth	Month	Day	Year
Applicant's Telephone #	Include Area Code and Number		
<p>RELEASE</p> <p>I, _____ hereby acknowledge and agree to a check of any criminal record of convictions which may be maintained by the Vermont Criminal Information Center. I understand that the results of that check will be made available to <u>GMT</u> for use in reviewing my suitability for employment. I further understand that I have the right to appeal the results of the criminal record check to the Vermont Criminal Information Center, Department of Public Safety, 103 South Main Street, Waterbury, Vermont, 05671-2101.</p>			
Signature of Applicant		Date	

RELEASE AUTHORIZATION and FAIR CREDIT REPORTING ACT DISCLOSURE

I am applying for an employment position with Green Mountain Transit (hereinafter "GMT"). I acknowledge that GMT has informed me that as part of the procedure for processing my application for employment, it plans to conduct a background check of me.

This background check will consist of:

- > Criminal Background
- > Social Security Information
- > Motor Vehicle Record
- > Credit Check

Further, I understand that GMT will be utilizing the services of BIB, LLC. (for Criminal Backgrounds and Social Security Information and for Motor Vehicle Records) which will actually perform the background check on behalf of GMT.

By signing below, I hereby consent and give GMT, and/or BIB, LLC., permission to conduct a background check of me. I understand that the information procured from the background check may be used, in whole or in part, to determine my eligibility for employment with GMT. I understand that before I am denied employment based on information obtained in the report, GMT will provide me with a copy of the report and a written description of my rights under the Federal Fair Credit Reporting Act.

By signing below, I hereby authorize GMT to obtain and use a background check report, as described above, for employment purposes. If I am hired by GMT, this release and authorization shall remain valid and in effect during the term of my employment with GMT. I acknowledge that GMT reserves the right to conduct subsequent background checks of me on an as-needed basis.

I hereby forever release and discharge GMT, and its employees and agents, from all claims or liabilities whatsoever that may arise from the gathering and reporting of information obtained from the background check.

I HAVE CAREFULLY READ THIS ACKNOWLEDGMENT AND CONSENT TO A BACKGROUND CHECK, I UNDERSTAND THE CONTENTS HEREIN AND I HEREBY AFFIRM MY AGREEMENT TO ITS TERMS.

Date _____

Applicant Signature _____

Full Name: _____

Date of Birth: _____ *

Social Security Number: _____

Driver License #/State: _____

Expiration Date _____

Current Residence Address: _____

* Date of Birth is required for background check purposes only; it will not be used for any other purpose.

AUTHORIZATION AND ACKNOWLEDGMENT REGARDING BACKGROUND INVESTIGATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION, "A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT", "ADDITIONAL STATE LAW NOTICES" and certify that I have read and understand those documents. I hereby authorize Green Mountain Transit to obtain "consumer reports" and/or "investigative consumer reports" about me at any time after receipt of this authorization and, if I am hired, throughout my employment. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, military branch, institution, school or university (public or private), information service bureau, past or present employer or supervisor, private business, insurance company or personal reference, and/or other persons to furnish any and all background information requested by BIB, additional third-party organizations acting on behalf of the Company, and/or the Company itself. I agree that a facsimile ("fax") or photographic copy or digital copy of this Authorization shall be as valid as the original.

Signature: _____ **Date:** _____

Print Name: _____ **Date of Birth:** _____

- ☐ Please check this box if you are a **Minnesota or Oklahoma** applicant or employee and would like to receive a copy of a consumer report if one is obtained by the Company.

☐ Please check this box if you are a **California** applicant or employee and you would like to receive a copy of an investigative consumer report or consumer credit report if one is obtained by the Company at no charge whenever you have a right to receive such a copy under California law. By signing above, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW

Personal Identifying Information Needed For Background Check – To facilitate a background check on you, please complete the information below and include all past or current names used (e.g., maiden, surname, alias).

Last Name	First	Middle	
Last Name	First	Middle	
Last Name	First	Middle	
Home Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date of Birth	Social Security No.	Gender	Race
Drivers License Number	State Issued	Expires	

A copy of your Identification, such as a Driver's License, is required



DEPARTMENT OF MOTOR VEHICLES
Agency of Transportation
dmv.vermont.gov

Vermont DMV Record Request

120 State St
Montpelier, Vermont 05603-0001
802.828.2000

All applicable sections of this form (front and back) must be completed to obtain the requested information. Do not mail cash! Make check or money order payable (in U.S. funds) to: Vermont Department of Motor Vehicles.

All requests must include proof of identification (i.e., copy of your state issued ID). For a driver record other than your own please also include documentation proving you are authorized to obtain the requested information. All requests not including required documentation will be returned.

Signature required on back of form.

Requester Name:		DBA/Company Name:	
Nature of Business:			
Mailing Address:	Street/Box Number:		
	City, State, Zip Code:		
Mail to (if different than above):			
Telephone:		Email:	

Documents Requested (select all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Listing of 1 - 4 current or expired registrations – \$8.00 | <input type="checkbox"/> Periodic inspection sticker record – \$8.00 |
| <input type="checkbox"/> Listing of 1 - 4 current or expired operator's license – \$8.00 | <input type="checkbox"/> Certified copy of suspension notice – \$8.00 |
| <input type="checkbox"/> Certified copy of current or original registration application – \$8.00 | <input type="checkbox"/> Certified copy of reinstatement notice – \$8.00 |
| <input type="checkbox"/> Certified copy of expired operator's license application – \$8.00 | <input type="checkbox"/> Certified copy of title – \$6.00 |
| <input type="checkbox"/> Certified copy individual accident report – \$12.00 | <input type="checkbox"/> Certified copy of vehicle title search, title info, lien info. – \$22.00 |
| <input type="checkbox"/> Certified copy police accident report – \$18.00 | <input type="checkbox"/> Certified copy of vessel, snowmobile, or ATV title search – \$13.00 |
| <input type="checkbox"/> Insurance information of accident – \$8.00 | <input type="checkbox"/> Certified copy of 3-year operating record (Vermont only) – \$14.00 |
| <input type="checkbox"/> Statistics and research – \$42.00 per hour | <input type="checkbox"/> Certified copy of complete operating record (Vermont only) – \$20.00 |
| <input type="checkbox"/> List of registered dealers, transporters, periodic inspection stations, rental vehicle companies, fuel dealers and distributors (including gallons sold or delivered - \$8.00 per page) | |
| <input type="checkbox"/> Other – Provide detailed explanation on reverse side. All other forms of information requested provided will be at a minimum of \$8.00 per page | |

Information requested concerning (complete as much information as possible):

VIN:		Vehicle Make:	Vehicle Year:	VT License Plate:	Expiration Date:	
Name:		VT Driver's License Number:	Date of Birth:	Social Security Number:		
Date(s) you want covered, if applicable. Does not apply to driving records.						
Month:	Day:	Year:	Through	Month:	Day:	Year:
Specific information requested:						
Detailed explanation of intended use (attach additional sheet if necessary):						

The information requested may be disclosed if authorized by the Driver Privacy Protection Act. Information being requested is **(initial appropriate category below*¹)**:

1. For use by any government agency, including any court or law enforcement agency, in carrying out its functions, or any private person acting on behalf of a government agency in carrying out its functions. (18 U.S.C. §2721(b)(1))
2. For use in connection with matters of motor vehicles or driver safety and theft; motor vehicle emissions; motor vehicle product alterations, recalls, or advisories; performance monitoring of motor vehicles, motor vehicle parts, and dealers; motor vehicle market research activities, including survey research; and removal of non-owner records from the original owner records of motor vehicle manufacturers. (18 U.S.C. §2721(b)(2))
3. For use in the formal course of business by a legitimate business or its agents, employees, or contractors to verify the accuracy of personal information submitted by the individual to the business or its agents, employees, or contractors. (18 U.S.C. §2721(b)(3)(A))
If information provided does not match DMV records, correct information will not be provided. DMV will only disclose that information does not match.
4. For use in connection with any proceeding in any court or government agency or before any self-regulatory body, including the service of process, investigation in anticipation of litigation, and the execution or enforcement of judgments and orders, or pursuant to an order of any court. (18 U.S.C. §2721(b)(4))
5. For use by any insurer or insurance support organization, or by a self-insured entity, or its agents, employees, or contractors, in connection with claims investigation activities, antifraud activities, rating, or underwriting. (18 U.S.C. §2721(b)(6))
6. For use by an employer, of its agent or insurer, to obtain or verify information relating to a holder of a commercial driver's license which is required under the Commercial Motor Vehicle Safety Act of 1996 [Title XII of Public Law 99-570]. (18 U.S.C. §2721(b)(9))
7. Unrestricted or specified use with written consent of the person who is the subject of the information. This includes information regarding oneself ("Authorization of Release" below must be completed in full). (18 U.S.C. §2721(b)(13))
8. For any use specifically authorized by law that is related to the operation of a motor vehicle or public safety. (18 U.S.C. §2721(b)(14))

AUTHORIZATION OF RELEASE OF INFORMATION

I hereby, with my signature, authorize (name of person or business you are authorizing):

- ☐ To perform a one-time search of the Vermont Department of Motor Vehicles files pertaining to me and any resulting reports. Or
☐ A one-time authorization to transact business pertaining to me within the Vermont Department of Motor Vehicles.

Signature of individual authorizing release:

Date of authorization:

In requesting and using this information I acknowledge that this disclosure and any re-disclosure is subject to the Driver Privacy Protection Act (18 U.S.C. §2723). This is signed and the request is made subject to penalties of 18 U.S.C §2723 and V.S.A. §202.

Signature of requestor:

Date of request:

S Reid

Printed name of requestor:

Driver's license number of requestor:

Upon receipt of this request by the Vermont Department of Motor Vehicles, it will be reviewed by appropriate personnel to determine whether this request conforms to DPPA protocol and requirements. Failure to meet these qualifications or to provide adequate information to make a determination will result in the denial of your request.

FOR DEPARTMENT USE ONLY – DO NOT WRITE BEYOND THIS POINT

This request is hereby denied as the record(s) is/are exempt from inspection and copying for the following reason:

- ☐ They are records which, by law, are designated confidential or by a similar term.
☐ They are records which, by law, may only be disclosed to specifically designated persons.

You have the right to appeal this denial to the Commissioner of Motor Vehicles (must be submitted in writing).

Vermont Department of Motor Vehicles _____

¹ Documents identifying the requestor are required for all requests. You must include copies of your state issued identification and documentation that you are authorized to obtain the requested information. If you are unsure of what documents are required, please call 802.828.2000.

Fair Credit Reporting Act Background Check Disclosure

In connection with your employment application and for other employment purposes, Green Mountain Transit through its authorized agent Vermont Public Transportation Association (“VPTA”) may seek background information about you from a consumer reporting agency. This information will be in the form of consumer reports and/or investigative consumer reports, as defined by the federal Fair Credit Reporting Act (FCRA).

These reports will be obtained on **a monthly basis during the period of your employment** if Green Mountain Transit hires you and after Green Mountain Transit receives authorization from you.

Consumer reports include any written, oral, or other communication of information by a consumer reporting agency bearing on your credit standing, character, general reputation, and other personal characteristics that is expected to be used for employment purposes. Consumer reports may include credit reports, criminal records, education or employment history and driving records, among other resources.

Investigative consumer reports include similar information as consumer reports, which are obtained through personal interviews with those who are acquainted with you or who may have knowledge of any relevant information about you.

Inflection Risk Solutions, LLC d/b/a GoodHire, or another consumer reporting agency, will obtain the reports for Green Mountain Transit.

You have the right to request information from Green Mountain Transit and VPTA about the nature and scope of any investigative consumer report on you that is requested by Green Mountain Transit. The request must be made in writing and within a reasonable period of time after you have received this disclosure.

A summary of your rights under the FCRA is being provided to you with this disclosure.

Please sign below to acknowledge the receipt of this disclosure.



Signature



Date



Printed Name

Authorization to Obtain Consumer Reports Under the Fair Credit Reporting Act

I acknowledge that I have received and read the *Fair Credit Reporting Act Background Check Disclosure, A Summary of Your Rights Under the Fair Credit Reporting Act*, and this Authorization. I certify that I understand the documents I have received.

I hereby authorize Green Mountain Transit through its authorized agent Vermont Public Transportation Association (“VPTA”), for employment purposes, to obtain or prepare consumer reports and/or investigative consumer reports as defined by the federal Fair Credit Reporting Act (FCRA) **monthly after it receives this Authorization, and so long as I may be employed by Green Mountain Transit.**

I understand that the scope of the consumer report/investigative consumer report may include, but is not limited to, the following areas: verification of Social Security number; current and previous residences; employment history, including all personnel files; education; references; credit history and reports; criminal history, including records from any criminal justice agency in any or all federal, state or county jurisdictions; birth records; motor vehicle records, including traffic citations and registration; and any other public records.

I hereby authorize law enforcement agencies, public and private schools, federal, state and local agencies and courts, credit bureaus, information bureaus, current and former employers, financial institutions, licensing agencies, governmental agencies, the military, and other individuals and entities to provide any and all information that is requested by Inflection Risk Solutions, LLC d/b/a GoodHire, other consumer reporting agencies, or Green Mountain Transit through its authorized agent VPTA.



Signature



Date



Printed Name

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street NW, Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street NW, Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer

reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-567-8688.
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a “security freeze” on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is

placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
<p>1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:</p>	<p>a. Consumer Financial Protection Bureau 1700 G Street NW Washington, DC 20552</p> <p>b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue NW Washington, DC 20580 (877) 382-4357</p>
<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks</p> <p>b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act.</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group P.O. Box 53570 Houston, TX 77052</p> <p>b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480</p> <p>c. Division of Depositor and Consumer Protection National Center for Consumer and Depositor Assistance Federal Deposit Insurance Corporation 1100 Walnut Street, Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Financial Protection 1775 Duke Street Alexandria, VA 22314</p>
<p>3. Air carriers</p>	<p>Assistant General Counsel for Office of Aviation Consumer Protection Department of Transportation 1200 New Jersey Avenue SE Washington, DC 20590</p>
<p>4. Creditors Subject to the Surface Transportation Board</p>	<p>Office of Public Assistance, Governmental Affairs, and Compliance Surface Transportation Board 395 E Street SW Washington, DC 20423</p>
<p>5. Creditors Subject to the Packers and Stockyards Act, 1921</p>	<p>Nearest Packers and Stockyards Division Regional Office</p>
<p>6. Small Business Investment Companies</p>	<p>Associate Administrator, Office of Capital Access United States Small Business Administration 409 Third Street SW, Suite 8200 Washington, DC 20416</p>
<p>7. Brokers and Dealers</p>	<p>Securities and Exchange Commission 100 F Street NE Washington, DC 20549</p>
<p>8. Institutions that are members of the Farm Credit System</p>	<p>Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090</p>
<p>9. Retailers, Finance Companies, and All Other Creditors Not Listed Above</p>	<p>Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue NW Washington, DC 20580 (877) 382-4357</p>

APPLICANT - EMPLOYEE DOCUMENTS

The following pages contain 5 documents:

- ☐ **“Disclosure Regarding Background Investigation”** – The disclosure must remain a “stand-alone” document and may not be combined with other forms or applications including the authorization. This document **MUST** be provided to every applicant or employee **BEFORE** you place an order for any employment screening report including Reference Reports, Verifications or Background Checks.
- ☐ **“Authorization and Acknowledgment Regarding Background Investigation”** – This document **MUST** be signed by every applicant or employee **BEFORE** you place an order for any employment screening report including Reference Reports, Verifications or Background Checks.
- ☐ **Personal Identifying Information Needed For Background Check**: This document **MUST** be completed by every applicant or employee **BEFORE** you place an order for any employment screening report including Reference Reports, Verifications or Background Checks.
- ☐ **“A Summary of Your Rights under the Fair Credit Reporting Act”** – This is a 3 page informational document that explains the applicant’s rights under the FCRA. It **MUST** be given to every applicant **BEFORE** you place an order for any employment screening report including Reference Reports, Verifications or Background Checks.
- ☐ **“Additional State Law Notices”**: Some states require that applicants or employees receive additional information. These template forms have been created with the idea that you may have applicants/employees residing in, working, or applying to work in any of the 50 states. Accordingly, as presently constructed, the “Additional State Law Notices” **MUST** be provided to each applicant/employee that receives the materials. Please note that state and local laws may change and additional requirements for employers may be created. It is your responsibility to make sure your policies are compliant with such laws and requirements.
- ☐ **Notice Regarding Background Investigation Pursuant To California Law**: This document **MUST** be provided to every applicant or employee that is living in or is seeking work for the Company in California.

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

Green Mountain Transit may obtain information about you from a consumer reporting agency for employment purposes. Thus, you may be the subject of a “consumer report” and/or an “investigative consumer report” which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends or associates. These reports may contain information regarding your criminal history, credit history, motor vehicle records (“driving records”), verification of your education or employment history or other background checks. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your employment history conducted by Background Investigation Bureau, LLC, (“BIB”), 9710 Northcross Center Court, Huntersville, NC 28078, (877) 439-3900. You should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

ADDITIONAL STATE LAW NOTICES

If you live in, work in, or are seeking work for Green Mountain Transit in Massachusetts, Minnesota, New Jersey, New York, or Washington State, please note:

MASSACHUSETTS APPLICANTS/EMPLOYEES: You have the right to inspect and promptly receive a copy of any investigative consumer report requested by the Company by contacting the consumer reporting agency, Background Investigation Bureau, LLC, ("BIB"), 9710 Northcross Center Court, Huntersville, NC 28078, (877) 439-3900.

MINNESOTA APPLICANTS/EMPLOYEES: You have the right, upon written request, to receive a complete and accurate disclosure of the nature and scope of any consumer report by contacting the consumer reporting agency, Background Investigation Bureau, LLC, ("BIB"), 9710 Northcross Center Court, Huntersville, NC 28078, (877) 439-3900. The consumer reporting agency must make this disclosure within five days of receipt of your request or of Company's request for the report, whichever is later.

NEW JERSEY APPLICANTS/EMPLOYEES: You have the right to inspect and promptly receive a copy of any investigative consumer report requested by the Company by contacting the consumer reporting agency, Background Investigation Bureau, LLC, ("BIB"), 9710 Northcross Center Court, Huntersville, NC 28078, (877) 439-3900.

NEW YORK APPLICANTS/EMPLOYEES: You have the right, upon request, to be informed of whether or not a consumer report was requested from a consumer reporting agency by contacting the consumer reporting agency, Background Investigation Bureau, LLC, ("BIB"), 9710 Northcross Center Court, Huntersville, NC 28078, (877) 439-3900. If a consumer report is requested, you will be provided with the name and address of the consumer reporting agency furnishing the report. You may inspect and receive a copy of the report by contacting BIB with the contact information above.

WASHINGTON STATE APPLICANTS/EMPLOYEES: If Company requests an investigative consumer report from a consumer reporting agency, you have the right to receive a complete and accurate disclosure of the nature and scope of the investigation requested by Company. You also have the right to request from the consumer reporting agency, Background Investigation Bureau, LLC, ("BIB"), 9710 Northcross Center Court, Huntersville, NC 28078, (877) 439-3900, a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

<p style="text-align: center;">NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW</p>
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Green Mountain Transit intends to obtain information about you from an investigative consumer reporting agency and/or a consumer credit reporting agency for employment purposes. Thus, you can expect to be the subject of “investigative consumer reports” and “consumer credit reports” obtained for employment purposes. Such reports may include information about your character, general reputation, personal characteristics and mode of living. With respect to any investigative consumer report from an investigative consumer reporting agency (“ICRA”), the Company may investigate the information contained in your employment application and other background information about you, including but not limited to obtaining a criminal record report, verifying references, work history, your educational achievements, licensure, and certifications, your driving record, and other information about you, and interviewing people who are knowledgeable about you. The results of this report may be used as a factor in making employment decisions. The source of any investigative consumer report (as that term is defined under California law) will be Background Investigation Bureau, LLC, (“BIB”), 9710 Northcross Center Court, Huntersville, NC 28078, (877) 439-3900. The source of any credit report will be Background Investigation Bureau, LLC, (“BIB”), 9710 Northcross Center Court, Huntersville, NC 28078, (877) 439-3900. The BIB privacy policy may be found at www.BIB.com

The Company agrees to provide you with a copy of an investigative consumer report when required to do so under California law.

Under California Civil Code section 1786.22, you are entitled to find out from an ICRA what is in the ICRA’s file on you with proper identification, as follows:

- In person, by visual inspection of your file during normal business hours and on reasonable notice. You also may request a copy of the information in person. The ICRA may not charge you more than the actual copying costs for providing you with a copy of your file.
- A summary of all information contained in the ICRA’s file on you that is required to be provided by the California Civil Code will be provided to you via telephone, if you have made a written request, with proper identification, for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or charged directly to you.
- By requesting a copy be sent to a specified addressee by certified mail. ICRA’s complying with requests for certified mailings shall not be liable for disclosures to third parties caused by mishandling of mail after such mailings leave the ICRA’s.

“Proper Identification” includes documents such as a valid driver’s license, social security account number, military identification card, and credit cards. Only if you cannot identify yourself with such information may the ICRA require additional information concerning your employment and personal or family history in order to verify your identity.

The ICRA will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information contained in files maintained on you. This written explanation will be provided whenever a file is provided to you for visual inspection.

You may be accompanied by one other person of your choosing, who must furnish reasonable identification. An ICRA may require you to furnish a written statement granting permission to the ICRA to discuss your file in such person’s presence.