

Disclosure Statement



I, _____, hereby acknowledge that as a part of the employment process with Lorene's Place II I am required to go through a background check and therefore give my permission for such a procedure to take place. I understand this is a policy of Lorene's Place II and a requirement mandated by law by the State of Washington due to the nature of business Lorene's Place II provides. The sole purpose of this inquiry is to be used strictly for employment purposes and for no other purpose. Any violation of this is punishable by law and all matter is subject to review by only designated staff of Lorene's Place II. All information gathered is strictly confidential and to be kept filed in a secure location away from the general public.

If there are any questions please feel free to contact Human Resources for Lorene's Place II.

Applicant's Signature

Date