

First Legacy Corporation

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BACKGROUND SCREENING FORM

FIRST NAME: _____ MIDDLE: _____

LAST: _____ SSN: _____

LIST ALL OTHER NAMES YOU HAVE INCLUDING NICKNAMES AND MAIDEN NAMES:

ADDRESS: _____

CITY: _____ ZIP: _____

PHONE: _____ BIRTHDATE: _____ SEX: MALE FEMALE

Please answer the following questions:

1. Have you ever been arrested for or convicted of a misdemeanor or felony offense? ____ NO ____ YES
2. Have you ever been arrested or convicted of driving while under the influence of alcohol, driving while impaired or driving under the influence of drugs? ____ NO ____ YES
3. Have you ever had a restraining order issued against you? ____ NO ____ YES
4. Have you ever filed for bankruptcy or Chapter 11? ____ NO ____ YES
5. Have you ever had your Real Estate License or Life License suspended or revoked? ____ NO ____ YES
6. Are you authorized to work in the United States? ____ NO ____ YES

If you answered yes to either of the above questions 1-5 provide the details below. If additional space is needed, please attach a separate letter of explanation.

By signing this form, I understand an investigation will be conducted of all information contained on this form. I also understand that the results of the investigation will be considered, along with all other information submitted on this form, in making a decision concerning my suitability as a member of First Legacy Corporation. The information in this application is true and correct to the best of my knowledge. I further understand that inaccurate or untruthful responses to the questions contained in this form may be the basis for refusal to my membership application or termination from the First Legacy Corporation.

SIGNATURE _____ DATE: _____