iPloy Incorporated 11th Floor MSY Tower Pescadores Road Cebu Business Park, Cebu City 6000



CONSENT FOR PRE-EMPLOYMENT REFERENCE AND BACKGROUND CHECKS

I,MARY JUDY ANN BRIGOLI hereby authorize Iploy Inc. and/or it's representatives to make investigation of my background, references, character, past employment, consumer reports, education, and criminal history record information which may be in any state or local files, including those maintained by both public and private organizations, and all public records, for the purpose of confirming the information contained on my application and/or obtaining other information which may be material to my qualifications for employment. A telephone facsimile (fax), scanned copy or xerographic copy of this consent shall be considered as valid as the original consent.
I hereby consent to the Company's verifying all the information I have provided on my application form. I also agree to execute as a condition of employment or a condition of continued employment any additional written authorization necessary for the company to obtain access to and copies of records pertaining to this information. With regard to the foregoing disclosures, I hereby agree to release any person, company, or other entity from any and all causes of action that otherwise might arise from supplying the Company with information it may request pursuant to this release. I understand that any false answers or statements, or misrepresentations by omission made by me on this application or any related document, will be sufficient for rejection of my application or of my immediate discharge should such falsifications or misrepresentations be discovered after I am employed.
I release Iploy Inc., its employees, designated representatives, agents, officers and trustees from any and all claims of liability or damage due to either the procurement or the true and accurate disclosure of such records or information.
Applicant Name: MARY JUDY ANN BRIGOLI
Present Address: 49-J LOREGA LAWIS LOREGA SAN MIGUEL STREET CEBU CITY
Social Security Number: Date of Birth: Date of Birth:
Signature:
Date: 08-03-2020