Pre-Engagement Screening (PES) Process Guide

February 2025

Category 2 Suppliers

J.P.Morgan

These instructions are to be followed for select Contingent Workers who do not require an ID badge but provide a service to JPMC that may require them to have access to JPMC data or property or its customers (tangible or intangible) and who are not considered Category 1 Supplier Personnel

Screening requires workers to get fingerprinted for a criminal background check

Please note that additional screening will be required if access to JPMC systems and/or ID badge is needed

All Personnel must be fingerprinted and cleared by Global Workforce Screening prior to their assignment with JPMorgan Chase

JPMC will only disclose eligibility for assignment at JPMorgan Chase – no details of the screening results will be provided to the Supplier



United States Pre-Engagement Screening Instructions

Pre-Requisites:

When filling out the application, follow these important instructions:

- Use full legal name on application
- Confirm you entered the correct Social Security Number
- You MUST include an applicable JPMC Cost Center (see Supplier for this information)
- Provide Agency name; the company you are directly employed by

Step 1: Complete worker information and capture screening consents:

- 1. Supplier instructs worker to visit <u>Application Station 2.0</u> site
- 2. Enter code FPCVENDOR in the Application Station Code section
- 3. Complete all required fields, and sign the consent
- 4. Submit Application once submitted, the screen will present a Fieldprint code for step 2

***Note**: This step must always be performed **<u>BEFORE</u>** scheduling an appointment in step 2 as this is a regulatory and JPMC requirement.

Step 2: Schedule Fingerprint Appointment:

1. Follow instructions at the end of Application Station to schedule fingerprint appointment

***Note**: The screening turn around time varies from 2 to 10 business days or more, depending upon the worker's responsiveness to any request for additional information

Step 1: Access the Application Station website and select SIGN UP

Returning user login Sign up If you are new to our system, sign up Enter your previously created username and password to complete or submit a saved form or to to start a form. submit a new form. If you have not already set up an account, please select "Sign up". Sign up Log in

> This is a restricted computer system. It is for authorized use only. Use of this system constitutes consent to security monitoring and auditing. Unauthorized or improper use of the system is prohibited and may be subject to criminal and/or civil penalties.

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Welcome to ApplicationStation ®

<u>Step 2:</u> Read and sign the Disclosure and Consent form



E-SIGN Act Disclosure and Consent ("Consent Agreement")

Pursuant to the Federal Electronic Signatures in Global and National Commerce Act ("E-Sign Act"), you have a right to receive any disclosures or notices in a nonelectronic form. Before providing electronic signatures or obtaining legally required disclosures and notices electronically, please review and indicate your acceptance of the terms below. If you do not accept these terms or do not agree to the use of electronic disclosures and signatures, we will provide you with, or make available to you, any required disclosures on paper or non-electronic form at no additional charge to you.

1. Intent to Use Electronic Signatures

By clicking the "I AGREE" button below—which you hereby adopt as your electronic signature—you affirmatively consent and agree that you are signing this Consent Agreement electronically and your electronic signature on agreements and documents has the same effect as if you signed them in ink. You further agree that your electronic signature is the legal equivalent of your manual signature and will continue to be throughout the background screening process.

By clicking the "I AGREE" button below, you agree to the use of electronic signatures, such as your act of clicking, checking or otherwise manifesting your assent throughout the background screening process. You further agree that your use of a key pad, mouse or other device to select an item, button, icon or similar act/action, or in providing or making any agreement, acknowledgement, or consent constitutes your signature (hereafter referred to as "E-Signature"), acceptance and agreement as if actually signed by you in writing. You also agree that no certification authority or other third party verification is necessary to

You can download the "Consent Agreement" as a PDF file.

Consent Agreement.pdf(46 K) <u>+ Download</u>



l agree





Create Account

Please fill in the following fields to create an account.

Email*	
Username*	
Password *	show
Confirm Password *	show
First Name*	
Last Name*	
Mobile Phone Number	

Security Questions

Please select three security questions and provide answers in the boxes below. Your answer(s) cannot contain your username, password, email address or security question.

Security Question 1*

Select One

-



Step 3: Create account by filling out the required fields.

Select 3 security questions to provide answers to



Verify Account

An email has been sent to your provided email address. The subject of the email will be "ApplicationStation Account Verification" and will arrive from email sender auth@verticalscreen.com.

Please follow the directions in the email to continue creating your account. You may need to check your Junk or Spam folder.

(i) Please do not close your browser.

If your browsing session closes, please log back in using your username and password and enter the 8-digit **Verification Code** emailed to you at the email address provided during account creation. This **Verification Code** will expire after 30 minutes.

Verification Code *

Your 8-digit code

Didn't receive an email? Click here to resend email.

Complete Registration



<u>Step 4:</u>

Enter the verification code that was sent to the email address that was provided on the previous screen

Step 5: Log into your account

 Your account has been verified You have successfully verified your account, please log in. 	
Log in	
Username Username	
Password Password	
Back Login	
Forgot username? Forgot password?	

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<u>Step 6:</u> Select Start New Form

My Forms

Below you can view completed forms, continue with a previously started form or submit a new form.

If your form is In Progress - this means that it has not yet been submitted and can still be changed. Click on the Continue button to finish and submit the form.

If your form is Completed - this means it has been submitted and cannot be changed. Click on the View button to review the completed and submitted form.

Start a New Form - You are able to start a new form as long as you do not have one in progress for the same ApplicationStation Code. Click the Start New Form button to begin a new form.

Forms

+ Start New Form



<u>Step 7:</u> Enter in Application Station Code: **FPCVENDOR**

ApplicationStation Code

To proceed, please enter your ApplicationStation Code. If you do not have ApplicationStation Code, please contact the organization or individual that referred you to ApplicationStation to obtain one.

Code



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<u>Step 8:</u>

Fill out all required personal information.

Note: *Must use legal name and correct Social Security Number or Government Identification Number*

ons	Personal Informat	tion
Personal Information	Drofix	Solost One
Disclosure	Pretix	Select One
States Disclosures	First Name*	▲ First Name is required.
Fingerprint Processing Co	Middle Name	
BACKGROUND INVESTIGA	Last Name*	
Summary of Rights		⚠ Last Name is required.
	Suffix	Select One 👻
Summary	Country *	United States 👻
nit Forms	Address 1 *	e.g. 1 Main Street
irmation	Address 2	e.g. Apt. 1
	City / Town *	e.g. Washington
	State *	Select One 🗸
	Zip Code *	
	Resided Since * 🔞	Month Year •
Please select and ent	ter at least one governme	nt identification number: *
U.S. SSN	e.g. 111-21-1123	
Other Country ID	Select Country	- Enter ID
Date of Birth*	Month	Day Year
Phone *	United States +1	← e.g. 234-786-2935
	Туре 🔻	
Secondary Phone	Select Country	← Enter Phone Number
Email *	e.g. example@d	omain.com
	🛆 Email is requi	red.

Save & Continue →



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Su Co

<u>Step 8:</u>

Fill out all required personal information.

Note: *Must use legal name and correct Social Security Number or Government Identification Number*

> Personal information Prefix Select One > States Disclosures First Name*	ctions	Personal Informat	tion
Disclosure First Name* States Disclosures First Name* Processing Co Middle Name BACKGROUND INVESTIGA Last Name* Summary of Rights Suffix Summary Country * United States • Jown Summary Country * United States • Image: State	Personal Information	Profix	Select One
> States Disclosures) Disclosure	FrenX	Select One
Pingerprint Processing Co Middle Name BACKGROUND INVESTIGA Last Name* Summary of Rights Suffix Country * United States Address 1 * e.g. Apt. 1 City / Town * e.g. Washington State * Select One Zip Code *	> States Disclosures	First Name*	A First Name is required.
D BACKGROUND INVESTIGA D Summary of Rights Suffix Select One View Summary Country * Dimit Forms Address 1 * Address 1 * e.g. 1 Main Street pfirmation Address 2 Address 2 e.g. Apt. 1 City / Town * e.g. Washington State * Select One Zip Code *	> Fingerprint Processing Co	Middle Name	
Summary of Rights Suffix Select One View Summary Country * United States bmit Forms Address 1 * e.g. 1 Main Street nfirmation Address 2 e.g. Apt. 1 City / Town * e.g. Washington State * Select One Zip Code *	BACKGROUND INVESTIGA	Last Name*	
Suffix Select One view Summary Country * Dmit Forms Address 1 * Address 1 * e.g. 1 Main Street nfirmation Address 2 Address 2 e.g. Apt. 1 City / Town * e.g. Washington State * Select One Zip Code *	Summary of Rights		🗥 Last Name is required.
Country * United States brnit Forms Address 1 * Address 1 * e.g. 1 Main Street nfirmation Address 2 Address 2 e.g. Apt. 1 City / Town * e.g. Washington State * Select One Zip Code *	view Summary	Suffix	Select One
Address 1 * e.g. 1 Main Street Address 2 e.g. Apt. 1 City / Town * e.g. Washington State * Select One Tip Code * Resided Since * Month Year Please select and enter at least one government identification number: * U.S. SSN e.g. 111-21-1123 Other Country ID Select Country Enter ID Date of Birth* Month Day Year Year Phone * United States +1 e.g. 234-786-2935 Type Secondary Phone Select Country Enter Phone Number First 4		Country *	United States -
Address 2 e.g. Apt. 1 City / Town * e.g. Washington State * Select One Tip Code * Tip Code * Resided Since * Nonth Vear Vear Please select and enter at least one government identification number: * U.S. SSN e.g. 111-21-1123 Other Country ID Select Country Finter ID Date of Birth* Month Day Year Phone * United States +1 e.g. 234-786-2935 Type Secondary Phone Select Country Enter Phone Number	pmit Forms	Address 1 *	e.g. 1 Main Street
City / Town * e.g. Washington State * Select One • Zip Code * Resided Since * • Month • Year • Please select and enter at least one government identification number: * U.S. SSN e.g. 111-21-1123 Other Country ID Select Country • Enter ID Date of Birth * Month • Day • Year • Phone * United States +1 • e.g. 234-786-2935 Type • Secondary Phone Select Country • Enter Phone Number	hfirmation	Address 2	e.g. Apt. 1
State * Select One Zip Code * Resided Since * Month Vear Please select and enter at least one government identification number: * U.S. SSN e.g. 111-21-1123 Other Country ID Select Country Date of Birth* Month Phone * United States +1 e.g. 234-786-2935 Type Secondary Phone Select Country Secondary Phone		City / Town *	e.g. Washington
Zip Code * Resided Since * • Month • Year • Please select and enter at least one government identification number: * U.S. SSN U.S. SSN e.g. 111-21-1123 Other Country ID Select Country • Enter ID Date of Birth* Month • Day • Year • Phone * United States +1 • e.g. 234-786-2935 Type • Secondary Phone Select Country • Enter Phone Number		State *	Select One
Resided Since * Month • Please select and enter at least one government identification number: * U.S. SSN e.g. 111-21-1123 Other Country ID Select Country • Enter ID Date of Birth* Month • Date of Birth* Month • Date of Birth* Month • Day • Year • Phone * United States +1 • e.g. 234-786-2935 Type • Secondary Phone Select Country • Enter Phone Number		Zip Code *	
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Please select and enter at least one government identification number: * U.S. SSN e.g. 111-21-1123 Other Country ID Select Country Enter ID Date of Birth* Month Day Year Phone * United States +1 e.g. 234-786-2935 Type		Resided Since * 😢	Month • Year •
U.S. SSN e.g. 111-21-1123 Other Country ID Select Country Enter ID Date of Birth* Month Day Year Phone * United States +1 e.g. 234-786-2935 Type	Please select and ent	ter at least one governme	nt identification number: *
Other Country ID Select Country Enter ID Date of Birth* Month Day Year Phone * United States +1 e.g. 234-786-2935 Type	U.S. SSN	e.g. 111-21-1123	
Date of Birth* Month Day Year Phone * United States +1 e.g. 234-786-2935 Type Secondary Phone Select Country	Other Country ID	Select Country	- Enter ID
Date of Birth* Month Day Year Phone * United States +1 • e.g. 234-786-2935 Type • Secondary Phone Select Country •		Select country	
Phone * United States +1 e.g. 234-786-2935 Type Secondary Phone Select Country Enter Phone Number	Date of Birth*	Month	← Day ← Year ←
Phone * United States +1 e.g. 234-786-2935 Type			
Type • Secondary Phone Select Country Secondary Phone •	Phone *	United States +1	▪ e.g. 234-786-2935
Secondary Phone Select Country Enter Phone Number Enter Phone Number		Туре 👻	
	Secondary Phone	Select Country	← Enter Phone Number
e.g. example@domain.com	Email *	e.g. example@do	omain.com
⚠ Email is required.		🗥 Email is requi	red.

Save & Continue →



Disclosure

BACKGROUND SCREENING DISCLOSURE [FOR EMPLOYMENT PURPOSES]

Please be advised that a consumer report may be obtained on you for employment purposes (which includes independent contractors under the Fair Credit Reporting Act (FCRA)).

Consumer reports may be obtained at any time after the company receives your written authorization, including during the hiring process; and, during any subsequent period of employment you may have with the company, where permitted by law.

Under the FCRA, consumer reports include any written, oral or other communication of information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living that is used or is expected to be used for employment purposes. Consumer reports may include credit reports, criminal records and driving records, among other forms of information obtained from private and public record sources.

I acknowledge that I have read the information above.*

← Back

Save & Continue →

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<u>Step 9:</u> Read and acknowledge the Background Screening Disclosure.

Select Save and Continue

Step 10:

Read and acknowledge the State Disclosures.

Select Save and Continue

States Disclosures

Please be advised that a consumer report and/or investigative consumer report may be obtained on you for employment purposes. The consumer reporting agency that may provide the company with your report is:

BUSINESS INFORMATION GROUP, INC. P.O. Box 541 Southampton, PA 18966 bigreport.com (800) 260-1680

BIG's privacy practices with respect to the preparation and processing of consumer reports and/or investigative consumer reports may be found at http://www.bigreport.com/privacy-policy/.

For Massachusetts Applicants & Residents

You have the right, upon request, to know whether the company ordered an investigative consumer report about you. You also have the right to ask the consumer reporting agency for a copy of any such report.

For Minnesota Applicants & Residents

You have the right in most circumstances to submit a written request to the consumer reporting agency for a complete and accurate disclosure of the nature and scope of any consumer report the company ordered about you. The consumer reporting agency must provide you with this disclosure within five (5) business days after its receipt of your request or the report was requested by the company, whichever date is later. If an investigative consumer report is obtained, such a report may include information obtained through personal interviews regarding your character, general reputation, personal characteristics, or mode of living.

For New Jersey Applicants & Residents

You have the right to submit a request to the consumer reporting agency for a copy of any investigative consumer report the company ordered about you.

For New York Applicants & Residents

You have the right, upon written request, to be informed of whether or not a consumer report and/or investigative consumer report was requested. If a consumer report is requested, you will be provided with the name and address of the consumer reporting agency furnishing the report.

For Washington Applicants & Residents

If we request an investigative consumer report, you have the right, upon written request made within a reasonable period of time, to receive from us a complete and accurate disclosure of the nature and scope of the investigation. You are entitled to this disclosure within five business days after the date your request is received or we ordered the report, whichever is later. You have the right to request from the consumer reporting agency a summary of your rights and remedies under state law.

California, Minnesota, and Oklahoma Applicants & Residents:

You have the right to receive a free copy of your background report. Please check the box below if you would like a free copy of your report:

I would like a free copy of my report.

I acknowledge that I have read the information above.*



Save & Continue →



<u>Step</u>	<u>11:</u>	
Read	and	e-sian

Read and e-sign the Fingerprint Processing Consent form.

Select Save and Continue

Sections	Fingerprint Processing Consent		
 Personal Information 	SPECIFIC CONSENT FORM – FINGERPRINT PROCESSING		
• Fersonarinionnation	[Specific Purposes for Fingerprint Collection]		
 Disclosure 			
 States Disclosures 	[X] Federal Bureau of Investigation (FBI) /Banking Permissible Purpose		
O Fingerprint Processing Co	 I understand that my personal information and biometric data being submitted by Live Scan or through a fingerprint card process, will be used to search against identification records from the FBI for the purpose(s) listed above 		
O BACKGROUND INVESTIGA			
O Summary of Rights	 I consent to having my fingerprints taken and submitted for the purpose of a criminal history information check to the applicable agency as noted above and consent to the FBI sharing any criminal history record results 		
Review Summary	with J.P. Morgan Chase & Co. as part of its background investigation of my suitability for employment.		
Submit Forms	By signing below, I acknowledge that I have read the above and hereby provide my consent to the submission of the processing of my fingerprints as set forth above.		
	Please choose a signature method.*		
	\bigcirc L will provide a mouse or touchpad signature (preferred method if possible).		
	 I will print and fax a signed copy of this authorization. 		
Signature OK If you are co	moleculy esticated with your signature, slick Apply Signature		
R			
Clear A Please sign the application	n and hit Apply Signature.		
 I will print and fax a signed 	ed copy of this authorization.		
Date May 5, 2023	, agree.*		
← Back	Save & Continue →		



BACKGROUND INVESTIGATION AUTHORIZATION/DISCLOSURE

CONSUMER REPORT DISCLOSURE AND AUTHORIZATION UNDER THE FEDERAL FAIR CREDIT REPORTING ACT

> PLEASE TAKE NOTICE THAT JPMORGAN CHASE MAY OBTAIN A CONSUMER REPORT ON YOU

JP Morgan Chase & Co, as well as any of its affiliates and subsidiaries (collectively referred to as "JPMorgan Chase"), may obtain a consumer report on you for purposes of assessing your eligibility for assignment to JPMorgan Chase.

The consumer report will be obtained from Business Information Group, Inc., PO. Box 541, Southampton, PA 18966, with a toll-free telephone number of (800) 260-1680. A consumer report under the Fair Credit Reporting Act ("FCRA") is defined as any written, oral, or other communication of any information by a consumer reporting agency bearing on a consumer's credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living, which is used or expected to be used, or collected in whole or in part for the purpose of serving as a factor in establishing the consumer's eligibility for several delineated purposes. In this instance, it may include, but is not limited to, verification of educational background, prior employment records, public records, military records, credit history and criminal records.

In addition, JPMorgan Chase may procure, or cause to be prepared, an investigative consumer report on you, which may include information obtained from personal interviews as to your character, general reputation, personal characteristics, and mode of living, whichever are applicable. You have the right to request a disclosure, upon written request within a reasonable period of time after receipt of this disclosure, regarding the nature and scope of the investigation requested, to the extent an investigative consumer report pertaining to you is procured. You also have the right request the written summary of the rights of the consumer prepared pursuant to section 609(c) of the FCRA, which is being provided.

Authorization

By signing below, I agree that I have carefully read the above notice and I authorize the procurement of a consumer report and an investigative consumer report. I also acknowledge that this authorization shall remain in effect throughout my assignment to JPMorgan Chase, with no need to request a subsequent authorization.

As set forth in the employment application, arrest and conviction screenings, as well as all screenings, are conducted in accordance with applicable law.

Please choose a signature method.*

• I will provide a mouse or touchpad signature (preferred method if possible).



I will print and fax a signed copy of this authorization.

Date May 5, 2023

I, Renee Weber , agree.*

<u>Step 12:</u>

Read and e-sign the Background Investigation Authorization/Disclosure.

Select Save and Continue

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Read and acknowledge the Summary of Rights document.

Select Save and Continue

ections	Summary of Rights
 Personal Information 	Para información en español, visite <u>consumerfinance.gov/learnmore</u> o escribe al Consumer Financial Protection Bureau, 1700 G Street NW., Washington, DC 20552.
✓ Disclosure	A Summary of Your Rights Under the Fair Credit Reporting Act
 States Disclosures 	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
 Fingerprint Processing Co 	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.
 BACKGROUND INVESTIGA 	For more information, including information about additional rights, go to <u>consumerfinance.gov/learnmore</u> or write to: Consumer Financial Protection Bureau, 1700 G Street NW, Washington, DC 20552.
O Summary of Rights	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 been number of the argony that provided the information.
	. You have the right to know what is in your file
	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
I acknowledge	that I have read the information above.*

← Back

Save & Continue →



Step 14: Review that all information is accurate

Select Continue

Sections	Review Summary	
Personal InformationDisclosure	Now is the time to review your work for acci entered, click the "Edit" button. When you are satisfied with the information screen.	uracy and completeness. To change any of the information you have entered, you can click the "Continue" button to move to the next
 States Disclosures 	Personal Information	Edit
 Fingerprint Processing Co 	First Name	Renee
✓ BACKGROUND INVESTIGA	Last Name	Weber
Summary of Rights	Country	United States
• Summary of Rights	Address 1	2500 Westfield Dr
Review Summary	City / Town	Elgin
	State	Illinois
Submit Forms	Zip Code	60120
	Resided Since	Aug, 2014
	U.S. SSN	XXX-XX-1234
	Date of Birth	04/11/XXXX
	Phone	United States +1-815-678-7041, Home
	Email	reny03_2000@hotmail.com

← Back

Continue \rightarrow



Submit Forms





<u>Step 16:</u>

Follow the link to schedule Fingerprint appointment.

Be sure to capture the Fieldprint Code listed as you will need that to schedule the appointment

ections	Confirmation
 Personal Information 	You're almost finished! Please follow the additional instructions below. Background Screening Appointment
 Disclosure 	To schedule your background screening appointment, please follow the instructions below:
 States Disclosures 	1. <u>Click Here</u> 2. If prompted Login using your ApplicationStation credentials, or Create a Fieldprint account using the Sign Up
 Fingerprint Processing Co 	Button.
 BACKGROUND INVESTIGA 	4. Follow the online instructions on the Heidprint website, which will guide you through the process.
 Summary of Rights 	Once you have successfully scheduled, please print and review the appointment confirmation page carefully to ensure you bring the proper identification.
eview Summary	
	You can view copies of the information you have submitted:
onfirmation	 Data Collection Form Authorization Disclosure Other Notices (State Disclosures, Summary of Rights)
	If you do not wish to view the printable copies, you can close your browser now. If you wish to view these documents at a later time, you can log back in using your username, password and ApplicationStation code.
	If you would like to take a quick survey, please click <u>here</u> .
	(Back to My Forms) Log Out



♦ fieldprint

Step 1:

Enter in the Fieldprint code that was provided at the end of Application Station process

Reason

A Fieldprint Code is required to continue. If you do not have a Fieldprint Code, please contact the employer or organization that directed you to this website.

Fieldprint Code*

Continue



<u>Step 2:</u>

Fill out personal information and select Continue

Note: The name provided for the appointment must be your full, legal name and must match both forms of identification exactly

Data Collection	Personal Information	
O Personal Information	Please enter your personal informat	ion below.
Demographics Chase information Employer	You may skip to this section only after the previous sections have been fully completed. this is primary form of identification. You provide two forms of matching ide	creen must belong to the person attending the appointment. The name ist be your full, legal name and must match both forms of of birth provided must also be an exact match to what is listed on the <i>u</i> fingerprint collection appointment will not take place if you cannot entification.
	Acceptable Forms of ID	
O Biometric Disclosure	First Name *	
 FBI Noncriminal Justice Applicant's Privacy Rights 	Middle Name	
 FBI Privacy Statement and Privacy Notice 	Last Name * Suffix	Select one
	Other Names	
	Are there any other names you are O Yes O No	known by or have used (including maiden name, if applicable)? *
	Social Security Number* ③	
	Confirm Social Security Number*	
	Individual CRD Number 💿	
	Address Line 1* ③	
	Address Line 2 (Suite (Ant/ots) 3	

City* ③		
State* ⑦	Select one 🗸	
Zip Code* ②		
Date of Birth* ⑦	Month	
Phone* ⑦		
Alternate Phone ③		
Email* ③	e.g. example@domain.com	
Preferred Contact Method*	O Email O Phone	
Appointment Reminder* ③	⊖ Email ⊖ No	
Cancel & Start New	Continue	I
21		J.P.Morgan

Step 3: Fill out required demographic information

Select Continue

Data Collection	Demographics	ons. This information is used to positively identify you when performing a	
 Personal Information 	fingerprint-based background check.		
Demographics Chase Information	• Notice Fieldprint is required to provide demographic values established by the FBI and/or state and federal agencies.		
) Employer	* — Required Fields		
	Citizenship* 💿	Select one	
	Place of Birth* ⑦	Select one 🗸	
Biometric Disclosure	City of Birth* ②		
 FBI Noncriminal Justice Applicant's Privacy Rights 	Gender*	Select one 🗸	
FBI Privacy Statement and	Height* ?	Select one v ft Select one v in	
Privacy Notice	Weight* ②	lb	
	Eye Color* ⑦	Select one	
	Hair Color* ③	Select one	
	Race* 🕐	Select one	

Back

Continue



Step 4:

Fill out required Chase information and select Continue

Employer Name: JPMorgan Chase

Cost Center: See Supplier for correct Cost Center **YOU MUST ENTER IN A VALID COST CENTER**

Work Address: Enter in work location, if assignment requires you to work from home, can use the nearest branch or data center

Select Continue

Data Collection		Chase Information		
~	Personal Information	★ — Required Fields		
~	Demographics	Employer Name *		
0	Chase Information	Cost Center (all 0's if unknown)*		
0	Employer	Work Address		
		Line 1*		
		Line 2		
0	Biometric Disclosure	State*	Sele	
0	FBI Noncriminal Justice Applicant's Privacy Rights	City*		
0	FBI Privacy Statement and Privacy Notice	Zip Code*		
		Back		



Select one	~

Continue

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<u>Step 5:</u> Fill out required Employer information and select Continue

Employer Name: This would be the agency that employs you

Work Address: Enter in work location, if assignment requires you to work from home, can use the nearest branch or data center

Select Continue

Data Collection	Employer	
 Personal Information 	Please enter information below abo requires you to be fingerprinted.	ut your current or prospective employer, or the agency or organization that
✓ Demographics	★ — Required Fields	
✓ Chase Information	Employer Name* ③	⚠ Please enter the Employer Name.
O Employer	Address Line 1* ⑦	
	Address Line 2 (Suite/Apt/etc.) 💿	
	City* 💿	
O Biometric Disclosure	State* ②	Select one 🗸
O FBI Noncriminal Justice Applicant's Privacy Rights	Zip Code* 🕐	
O FBI Privacy Statement and Privacy Notice	Phone 💿	
	Back	Continue

<u>Step 6:</u>

Read and acknowledge the Biometric Disclosure

Select Continue

Biometric Disclosure Data Collection ★ — Required Fields Personal Information State Required Biometric Information Disclosure and Authorization Demographics Please be advised that your fingerprints will be collected, stored, and used in connection with your contract and/or employment with organization requesting your fingerprints ("ORGANIZATION"). Such collection, storage, and use of your fingerprints may occur at any time after the company receives your written Chase Information authorization, including during the hiring process, as well as during the course of your contract and/or employment with ORGANIZATION or for volunteering/licensing, as the case may be, where permitted by law ("Stated Purposes"). Employer Your fingerprints are being collected and used in order to obtain Criminal History Record Information (CHRI) from state governments and/or agencies in connection with your contract and/or employment or volunteering with ORGANIZATION, or for licensing, as the case may be. Authorization Your fingerprints and any information obtained using your fingerprints will be retained and stored by Fieldprint, Inc., and will be permanently destroyed minimally after three (3) years of your last interaction with Fieldprint, Inc. In some instances, we may retain your fingerprints for less than three (3) years or O Biometric Disclosure indefinitely, based on the requirements of our clients, which may be regulatory or otherwise. For the exact retention period for your particular purpose, please contact us at (888) 472-8918. You may view Fieldprint, Inc.'s Privacy Policy, on the retention and destruction of biometric information FBI Noncriminal Justice https://www.fieldprint.com/privacy-policy/ Applicant's Privacy Rights Authorization to Obtain and Disclose Biometric Information FBI Privacy Statement and By signing below, I hereby authorize Fieldprint, Inc. to collect, store, and use my fingerprints, and further authorize Fieldprint, Inc. to disclose and use my O Privacy Notice fingerprints to obtain criminal background information in connection with my Stated Purposes. By signing below, I further authorize Fieldprint, Inc. to share my fingerprint information, criminal results, and any other information obtained using my fingerprints with ORGANIZATION for the Stated Purposes. By signing below, I acknowledge and agree that this authorization to obtain and disclose/share my biometric information, criminal results, and any other information obtained using my fingerprints, is valid now as well throughout the course of my contract, employment, volunteering, and/or licensing, as may be applicable, with ORGANIZATION, where permitted by law. TO USE THIS SERVICE, YOU CERTIFY UNDER PENALTY OF LAW, THAT YOU ARE THE SAME PERSON WHO IS BEING FINGERPRINTED, WHO IS REVIEWING ALL OF THE APPLICABLE NOTICES AND COMPLETING THE APPLICABLE FORMS. IT IS STRICTLY PROHIBITED FOR ANYONE ELSE TO PROCEED FURTHER EXCEPT THE PERSON WHO IS BEING FINGERPRINTED, UNLESS YOU HAVE WRITTEN APPROVAL FOR SPECIAL CIRCUMSTANCES, SUCH AS A DISABILITY, FROM FIELDPRINT, INC. OR THE REQUESTING ORGANIZATION/AGENCY. I agree * Your Full Name Renee Weber Today's date Back Continue



<u>Step 7:</u>

Read and acknowledge the FBI Noncriminal Justice Applicant's Privacy Rights document

Select Continue

Data Collection	FBI Noncriminal Justice Applicant's Privacy Rights
✓ Personal Information	★ — Required Fields
✓ Demographics	NONCRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS
✓ Chase Information	As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you
✓ Employer	have certain rights which are discussed below. All notices must be provided to you in writing [1] These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulations (CFR), 50.12, among other authorities.
Authorization	 You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared, or retained. [2]
✓ Biometric Disclosure	 You must be advised in writing of the procedures for obtaining a change, correction, or update of your FBI criminal history record as set forth at 28 CFR 16.34. You must be provided the opportunity to complete or challenge the accuracy of the information in your FBI criminal history record (if you have such a record).
O FBI Noncriminal Justice Applicant's Privacy Rights	 If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the FBI criminal history record.
	• If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible
FBI Privacy Statement and	challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by
Privacy Notice	submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained
	at https://www.fbi.gov/services/cjis/identity-history-summary-checks and https://www.edo.cjis.gov.
	the agency that contributed the questioned information to the FBL Alternatively, you may send your challenge directly to the
	FBI by submitting a request via <u>https://www.edo.cjis.gov</u> . The FBI will then forward your challenge to the agency that
	contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.) • You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized
	purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.[3]

TO USE THIS SERVICE, <u>YOU CERTIFY UNDER PENALTY OF LAW</u>, THAT YOU ARE THE SAME PERSON WHO IS BEING FINGERPRINTED, WHO IS REVIEWING ALL OF THE APPLICABLE NOTICES AND COMPLETING THE APPLICABLE FORMS. IT IS <u>STRICTLY PROHIBITED</u> FOR ANYONE ELSE TO PROCEED FURTHER EXCEPT THE PERSON WHO IS BEING FINGERPRINTED, UNLESS YOU HAVE WRITTEN APPROVAL FOR SPECIAL CIRCUMSTANCES, SUCH AS A DISABILITY, FROM FIELDPRINT, INC. OR THE REQUESTING ORGANIZATION/AGENCY.

🔲 I acknowledge that I have read, understand, and agree to the above Statement.*





<u>Step 8:</u> Read and acknowledge the FBI Privacy Statement

Select Continue

Personal Information Demographics Chase Information Employer uthorization Biometric Disclosure	* — Required Fields Privacy Act Statement This privacy act statement is located on the back of the <u>ED-238 fingerprint card</u> . Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.		
	Privacy Act Statement This privacy act statement is located on the back of the <u>FD-258 flugerprint card</u> . Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.		
Chase Information Employer uthorization Biometric Disclosure	This privacy act statement is located on the back of the <u>FD-258 fingerprint card</u> . Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub L. 92-544, Presidential Executive Orders, and Federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.		
	Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and Federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.		
uthorization Biometric Disclosure	Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.		
 Biometric Disclosure 			
FBI Noncriminal Justice Applicant's Privacy Rights	Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your		
FBI Privacy Statement and Privacy Notice	fingerprints and associated information biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.		
	Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI slanket Routine Uses. Routine uses include,		
	out are not immete to, clasclosures to, employing, governmental or autonized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determiniations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.		
	As of 03/30/2018		
	2		
TO USE THIS SERV BEING FINGERPRI APPLICABLE FORM PERSON WHO IS E CIRCUMSTANCES, ORGANIZATION/A	VICE, <u>YOU CERTIFY UNDER PENALTY OF LAW</u> , THAT YOU ARE THE SAME PERSON WHO IS NTED, WHO IS REVIEWING ALL OF THE APPLICABLE NOTICES AND COMPLETING THE AS. IT IS <u>STRICTLY PROHIBITED</u> FOR ANYONE ELSE TO PROCEED FURTHER EXCEPT THE BEING FINGERPRINTED, UNLESS YOU HAVE WRITTEN APPROVAL FOR SPECIAL SUCH AS A DISABILITY, FROM FIELDPRINT, INC. OR THE REQUESTING GENCY. that I have read, understand, and agree to the above Statement.*		



Fieldprint Location

Please enter an address below to locate nearby Fieldprint® locations.

<u>Step 9:</u>

Enter in an address to find the nearest Fieldprint location

Select Find

 $\underline{\wedge}$ Please enter the Location.

☆ Near My Home Address
△ Near My Employer's Address

Find

Fieldprint Location

Please enter an address below to locate nearby Fieldprint® locations.

17 Results for 2500 Westfield Dr. Elgin, IL 60120

Please use the options below to proceed with scheduling.

× Clear Filter ۲ ۹ ۲ ۲ ۲ Fri Wed > Sat Sun Mon Tue 5 May 6 May 10 May 7 May 8 May 9 May Soonest Available Time Open Map View Distance 👏 1. Fieldprint Site - PostMart **Find Availability** 244 South Randall Road, Otter Creek Shopping Center - South of Route 20, Elgin IL 60123-M TU W TH F 10:00 AM - 04:00 PM ✓ No Additional Fees ✓ ADA Compliant ✓ Livescan ✓ Expedited Processing ✓ Photo ✓ 19 🌴 6.08 mi Ġ 👏 2. Fieldprint Site - Downtown Pro Photo Find Availability

Choose the location that is convenient in distance

Step 10:

Select Find Availability

J.P.Morgan

Fieldprint Location

Back to 17 Results

Schedule Appointment

Fieldprint Site - PostMart, 244 South Randall Road, Otter Creek Shopping Center - South of Route 20, Elgin IL 60123-

M TU W TH F 10:00 AM - 04:00 PM

🌴 6.08 mi 🔥

(i) Notice

Once an appointment is scheduled, it may not be changed or cancelled less than 24 hours before the appointment time without incurring a charge.

★ — Required Fields

Available Date*

Part of day *

May 🗸	8 ~	2023 🗸	
Morning (before 12 PM)	~	10:40 AM 🗸]



<u>Step 11:</u>

Choose the date and time for appointment

Select Continue

Schedule Appointment

(i) Notice

Once an appointment is scheduled, it may not be changed or cancelled less than 24 hours before the appointment time without incurring a charge.

Date and Time:

Location:

May 8, 2023 10:40 AM

Fieldprint Site - PostMart
 South Randall Road, Otter Creek Shopping Center - South of Route 20, Elgin IL
 60123-

Select Finish Scheduling

location of appointment

Confirm the date, time and

Step 12:

Back

Finish Scheduling



What to Bring to Your Appointment?

(i) Notice

Original Documents are required. Photocopies will not be accepted.

- Please provide your appointment number to the technician at the time of your appointment. You may print
 this appointment confirmation page or bring with you via phone or email.
- For purposes of confirming your identity for your appointment, you must present one form of a current, valid, unexpired government-issued photo ID.

Global Entry CardNative American Tribal ID Card

Foreign Passport

Draft Record

· Foreign Driver's License

Certificate of Citizenship

Work Visa w/ photo

Global Entry Card

Foreign Passport

· Foreign Driver's License

Certificate of Naturalization

Native American Tribal ID Card

Permanent Resident Card (I-551)
 DOD Common Access Card

I-766 Employment Authorization Card

Permanent Resident Card (I-551)

• US Dept of Veteran Affairs Card

Transportation Worker ID Credential (TWIC Card)

• I-766 Employment Authorization Card

If you do not bring two valid, unexpired, acceptable forms of ID, your appointment cannot be completed. The name provided for the appointment must match both forms of identification and the date of birth must be on the primary form of ID, and must match exactly.

Identification required to complete your appointment

Primary ID for Fingerprinting

- State-Issued driver's license
- State-issued non-driver identity
- U.S. Passport / Passport Card
- Military Identification Card
- DOD Common Access Card
- Work Visa w/ photo

Secondary ID for Fingerprinting

- State-Issued driver's license
- State-Issued non-driver identity
- U.S. Passport / Passport Card
- Military identification Card
- Bank Statement/Paycheck Stub
- Utility Bill / Insurance Card
- Credit Card/Debit Card
- Marriage Certificate
- Birth Certificate
- School ID w/ Photograph
- Social Security Card
- Vehicle Registration/Title
- Voter Registration Card

Reschedule or Cancel Renee Weber Appointment (#15813242)

Please note that once an appointment is made, you may not make a change or cancel less than 24 hours before the appointment time without incurring a charge.If you need to reschedule your appointment or cancel, please click the corresponded button below or call <u>877-614-4364</u>

If you decide to reschedule your appointment in the future, please return to <u>schedule2fieldprint.com</u>, log in as an existing user, and click on the Reschedule button to make a new appointment.

Cancel Appointment Reschedule

Step 13:

You will receive a confirmation notification as well as some instructions on what you need to bring to the appointment

Monday, May 8, 2023 10:40 AM

Date and Time:

Location:

Fieldprint Site - PostMart 244 South Randall Road, Otter Creek Shopping Center - South of Route 20, Elgin IL 60123-

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For technical issues regarding your Demographic Profile Application, please contact: Application Station Help: 1-888-291-1369 ext. 2006

For technical issues regarding your fingerprint appointment, please contact: Fieldprint Help: 1-877-614-4362

For general questions, please contact the JPMC Global Workforce Screening Team: GWS.Contingent.Workers@chase.com

