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| http://inside.cbs.state.or.us/docs/branding/logos/wcd/en/JPEG/WCD-logo-black.jpg | | |  | |  |
| **Worker Leasing Application**  **Disclosure Addendum Forms 2466 and 5364** | | | | | |
| Provide a separate Disclosure Addendum for each “yes” response to questions under the “Applicant business history” or “Controlling person disclosures” section of the worker leasing license application. (OAR 436-180-0140) | | | | | |
|  | |  | | |  |
| **Person or entity** | | **Name** | | |  |
| Applicant | |  | | | |
| Controlling person | |  | | | |
| **Addendum to which question?** | | | | | |
| Applicant business history:  a  b  c  d  Controlling person disclosures:  a  b  c  d | | | | | |
| Provide all applicable detail below. Add “n/a” if not applicable. Do not leave sections blank. You may also provide additional information you believe would assist the division in evaluating for licensure. | | | | | |
| Case name and number: |  | | | | |
| Name and location of court or jurisdiction: | | | |  | |
| License, registration, or certification number: | | | |  | |
| **Nature and date of action:** | | | | | |
| **Current status or final outcome (attach relevant documentation):** | | | | | |
| **Other information (attach additional pages or documents as necessary):** | | | | | |
|  | |  | | | **5380** |
| 440-5380 (8/24/DCBS/WCD/WEB) | |  | | |