

Employee Acknowledgment and Release Pursuant to the Illinois Biometric Information Privacy Act, 740 ILCS 14/15(b)

Well Child Center's Use of Biometric Information Employee Acknowledgement and Release

I understand and acknowledge that Well Child Conference of Elgin d/b/a Well Child Center, and its affiliates, partners, and vendors (collectively "WCC") may use a timekeeping system with biometric scanning features (which may include, but is not limited to, scanning your fingerprint, handprint, retina, iris, or face) to verify your identity for clocking in and out of the time clock.

I understand and acknowledge that a timekeeping system with biometric scanning features (which may include, but is not limited to, scanning your fingerprint, handprint, retina, iris, or face) may create data using a mathematical algorithm based off your "biometric identifiers" and/or "biometric information" (as those terms are defined in the Illinois Biometric Information Privacy Act, 740 ILCS 14/10) and use that data to verify your identity for future logins on the time clock. Additionally, I understand and acknowledge that your biometric identifiers and/or biometric information as well as any corresponding data may be disclosed to and accessible by the WCC third-party timekeeping vendor and/or licensor.

I understand and acknowledge that WCC only stores an individual's biometric identifiers and/or biometric information for so long as a person continues to be actively employed by WCC. Biometric information is deleted no later than last paycheck received by separated employee. In no cases is an individual's biometric identifiers and/or biometric information stored for more than three years after a person has stopped being actively employed by WCC.

I acknowledge that I have been advised that further information on WCC's use of biometric information is contained in the WCC Workforce Solutions Biometric Information Policy. I hereby consent to and release my biometric identifiers and/or biometric information for such use as described above. I further acknowledge that Well Child Center's Biometric Information Policy is available upon request and is publicly posted on the WCC website.

PRINT NAME of Employee

Employee Signature

Date