

EMPLOYMENT CONSENT FORM

An inquiry regarding:

Full Last Name _____ First _____ Middle _____ Maiden _____

Address _____ City _____ State _____

Previous Address _____ City _____ State _____

Date of Birth _____ / _____ / _____ Sex _____ Race _____
M D Y

Drivers License # _____ State _____

Social Security Number _____ / _____ / _____

I, _____, hereby authorize _____, to conduct a criminal records, credit report, drug screening, former employment and places of residence for the purpose of employment.

I hereby release any Law Enforcement Agency, credit bureau, company, corporation, or individual from all liability for furnishing information concerning me in response to this investigation.

The employment offer is conditional upon the receipt of satisfactory results. Any information revealed by this search that has not been disclosed to Employer, will be grounds for immediate dismissal.

Signature of Applicant

Date

WITNESS

DATE