

Employee Background Check Permission Form

Consumer Authorization

To Whom it May Concern:

I _____ hereby authorize and request any present or former employer, school, credit agency, financial institution, law enforcement agency, city, state, county and federal court and agency, military service or other persons having personal knowledge about me, to furnish bearer with any and all information in their possession regarding me in connection with an application for employment. I am willing that a photocopy of this authorization be accepted with the same authority as the original, and I specifically waive any written notice from any present or former employer who may provide information based upon this authorized request. I understand this authorization is to be part of the written employment application that I sign. This notice serves as consumer notification that a report will be requested and used for the purpose of evaluating me for employment, promotion, reassignment or retention as an employee.

Date _____

Print Applicant's Name _____

Applicant's Signature _____

For Identification Purposes Only:

Date of Birth _____

Social Security Number _____

Driver's License Number _____

Current Street Address _____

City, State, Zip Code _____

Telephone Number _____

Education: Supply Name of College/University; Address; State; Zip; Dates of Attendance; Degree:

Undergraduate: _____

Graduate: _____

Certificate: # _____ Exp: _____

Signature _____ Date _____