

APPLICANT'S AUTHORIZATION FOR RELEASE OF INFORMATION
THIS FORM TO BE COMPLETED AND SIGNED BY JOB APPLICANT

IN CONNECTION WITH, AND FOR THE DURATION OF MY EMPLOYMENT (INCLUDING CONTRACT FOR SERVICES) WITH YOU, I UNDERSTAND THAT INVESTIGATIVE BACKGROUND INQUIRES ARE TO BE MADE ON MYSELF THAT MAY INCLUDE CONSUMER, CRIMINAL, DRIVING, ACADEMIC AND OTHER REPORTS. THESE REPORTS WILL INCLUDE INFORMATION AS TO MY CHARACTER, WORK HABITS, PERFORMANCE AND EXPERIENCE.

FURTHER, I UNDERSTAND THAT YOU MAY BE REQUESTING INFORMATION FROM VARIOUS FEDERAL, STATE AND OTHER AGENCIES WHICH MAINTAIN RECORDS CONCERNING MY PAST ACADEMIC, EMPLOYMENT (including WORKER'S COMPENSATION CLAIMS), DRIVING, CREDIT, CRIMINAL, AND CIVIL HISTORIES AND OTHER EXPERIENCES.

I AUTHORIZE, WITHOUT RESERVATION, ANY PARTY OR AGENCY CONTACTED BY THIS EMPLOYER OR ITS AGENT, INFO QUEST, INC. TO FURNISH THE ABOVE INFORMATION:

APPLICANT'S SIGNATURE _____ DATE _____

PRINT FULL NAME _____

PREVIOUS LAST NAMES _____

SOC. SEC. NUMBER _____ - _____ - _____ DATE OF BIRTH _____
(DOB IS REQUESTED TO INSURE ACCURATE RETRIEVAL OF RECORDS.)

CITY AND STATE OF BIRTH _____

DRIVER'S LICENSE NUMBER _____ STATE OF ISSUE _____

CURRENT ADDRESS _____

CITY, STATE, ZIP _____

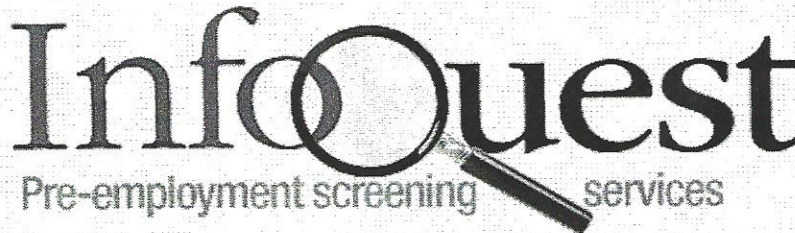
PREVIOUS ADDRESS IF AT ABOVE FOR LESS THAN ONE YEAR: _____

CITY, STATE, ZIP _____

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PROSPECTIVE EMPLOYER: _____

REQUESTOR: _____

RETURN FAX 843-233-9676/800-588-1152 OR EMAIL infoquest@securescreening.info



www.expertscreen.com

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____ CA, MN, OK, and NY applicants only: please check here to have a copy of your consumer report sent directly to you by InfoQuest, Inc