

PAGE 1 OF 1 RELEASE FORM for CONSUMER REPORTS

In connection with my application for employment (including contract for services), I understand that consumer reports or investigative consumer reports which may contain public record information may be requested or made on me including criminal records, driving record, education, prior employer verification, workers compensation claims and others. These reports will include experience along with reasons for termination of past employment. Further, I understand that you will be requesting information from various federal, state, local and other agencies which will contain my past activities.

I hereby authorize without reservation, another party or agency contacted by this employer to furnish the above mentioned information.

I further authorize ongoing procurement of the above mentioned reports at any time during my employment (or contract).

NAME	STREET ADDRESS	
SOCIAL SECURITY NUMBER	СІТУ	STATE ZIP
DRIVERS LICENSE NUMBER STATE		
	DATE OF BIRTH (MM DD YY) RACE	GENDER
For identification purposes:		
FORMER OTHER NAMES		
SIGNATURE (Sign digitally & email to employ@brelsfordpersonnel.com or provide a signed hard copy.)) DATE