**AUTHORIZATION FOR RELEASE OF INFORMATION**

In connection with my application for employment with

I ,authorize the procurement of a background screening report prior to any employment offer as well as periodic screening during employment should an offer be tendered and accepted. I understand that it may contain information about my background, character, general reputation, mode of living, criminal history, driving record, educational background, and job performance.

I further understand that my credit history may be obtained if necessary and authorized by the exceptions and exemptions listed under the Illinois Employee Credit Privacy Act, which allows credit reports to be obtained and used under the following situations:

-Banks and financial companies

-Insurance companies

-State law enforcement or investigative units.

-State and local government agencies that require the use of an employee’s credit history.

-Any entity defined as a debt collector.

-State or federal law requires bonding or other security covering an individual holding the position.

-The duties of the position include custody of or unsupervised access to cash or marketable assets valued at $2,500.00 or more.

-The duties of the position include signatory power over business assets of $100 or more per transaction.

-The position is a managerial position which involves setting the direction or control of the business.

-The position involves access to personal or confidential information, financial information, trade secrets, or State or national security information.

-The position meets criteria in administrative rules, if any, that the U.S. Department of Labor or the Illinois Department of Labor has promulgated to establish the circumstances in which a credit history is a bona fide occupational requirement.

-The employee’s or applicant’s credit history is otherwise required by or exempt under Federal or State law.

I understand that, upon written request within a reasonable period of time, I am entitled to additional information concerning the nature and scope of this pre-employment screening. I hereby release IDENTI-CHECK, Inc., its officers, agents, employees and servants from any liability arising from the preparation of this report or pre-employment screenings relating thereto.

This authorization for release of information includes, but is not limited to, matters of opinion relating to my character, ability, reputation and past performance. I authorize all persons, schools, companies, corporations, and law enforcement agencies to release such information without restriction or qualifications to IDENTI-CHECK, Inc. and any of its officers, agents, employees and servants. I voluntarily waive all recourse and release them from liability from complying with this authorization. I authorize that a photocopy of this release be considered as valid as the original. Under penalties of perjury as provided by law, the undersigned swears and affirms that the information provided is true and accurate.

Sign Date

CANDIDATE INFORMATION

## FULL NAME

## LAST FIRST MIDDLE

MAIDEN, ALIAS, ETC. SEX M F

DRIVERS LICENSE # DL STATE

DATE OF BIRTH SSN

**CURRENT ADDRESS:**

CITY STATE ZIP CODE COUNTY

RESIDED AT ADDRESS FROM TO

### PREVIOUS ADDRESSES:

CITY COUNTY STATE ZIP

RESIDED AT ADDRESS FROM TO

**CURRENT EMPLOYER:**

CITY STATE COUNTY PHONE ( )

POSITION SUPERVISOR

BEGINNING DATE ENDING DATE

**PREVIOUS EMPLOYER:**

CITY STATE COUNTY PHONE ( )

POSITION SUPERVISOR

BEGINNING DATE ENDING DATE

**COLLEGE/UNIVERSITY:**

CITY STATE COUNTY PHONE ( )

DEGREE BEGINNING DATE ENDING DATE

**COLLEGE/UNIVERSITY:**

CITY STATE COUNTY PHONE ( )

DEGREE BEGINNING DATE ENDING DATE

**LICENSES/CERITIFICATIONS:**

USE ADDITIONAL PAGES AS NEEDED