

Consent for the release of personal information

I _____, have applied for employment / contract work with _____ (The Company).

I understand that as a condition of my employment/contract work, the company will perform a full background check on me. These checks/searches may include some, or all the following: criminal search, drivers abstract, driver insurance history, credit history, employment verification, education verification, verification of address for up to 10 years, employment references, Verification of Drivers license status, Terrorism watch list check, Validation of SIN number.

I hereby authorize the holder(s) of information, relating to the items checked off below, to disclose the information requested, at any time, to the company and/or its authorized agents and ISB Canada.

I understand that the Company will use some or all the disclosed information provided, from any source to evaluate me and confirm my suitability for employment/contract work.

I hereby release and forever discharge the holder(s) of information relating to the above, including ISB Canada, and the Company, their respective affiliated entities and any former, current, and future partners, directors, officers, employees, agents, successors and assigns, including those belonging to affiliated entities, from any actions, claims, and demands of any kind whatsoever relating to the collection, disclosure, or use of this information by the holder(s) of information relating to the above items, ISB Canada or the Company. I further declare the information below, on my résumé/application, and provided verbally to the Company, is complete and accurate. I understand a false statement may disqualify me from employment and give cause for my dismissal if employed.

<input type="checkbox"/> Fraud Alert - <i>through Equifax Canada</i>	<input type="checkbox"/> Driver Record/Abstract/CVOR/NSC – Province _____
<input type="checkbox"/> Address Verification (up to 10 years) - <i>through Equifax Canada</i>	<input type="checkbox"/> Driver Insurance History
<input type="checkbox"/> SIN Validation – SIN# _____	<input type="checkbox"/> Consumer Credit Report - <i>through Equifax Canada</i>
<input type="checkbox"/> Check Driver License Status - - <i>through Check DL</i>	<input type="checkbox"/> Terrorism/Global Clearance
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Employment References/Verifications	
❖ <i>Last Name at time of Employment:</i>	
❖ <i>May we contact your current employer listed?</i>	
❖ <i>If yes above, Name of current employer?</i>	
<input type="checkbox"/> Education/Professional Verifications	
❖ <i>Last Name used during schooling/course(s):</i>	

Applicant First Name: _____ Last Name: _____

Date of Birth: _____

Applicant Signature: _____ Date: _____