

Letter of Authorization

To whom it may concern

I understand that the information provided by me may be used by the organization or an outside agency to verify and validate the information I have provided including my employment, my personal background, professional standing, work history and qualifications.

I understand that the organization or an outside background agency may obtain information it deems appropriate from various sources including, but not limited to, the following: current and past employers, criminal conviction records, school records, College records and professional and personal references.

I authorize, without reservation, any individual, corporation or other private or public entity to furnish the organization or outside background verification agency all information about me.

I unconditionally release and hold harmless any individual, corporation, or private or public entity from any and all causes of action that might arise from furnishing to the organization or outside background verification agency that they may request pursuant to this release.

This authorization and release, in original, faxed or photocopied form, shall be valid for this and any future reports and updates that may be requested.

Signature	
Name (In Block Letters)	
Date	