



BACKGROUND CHECK AUTHORIZATION

REMINDER: Please make sure to write your details legibly. If item/s being asked is not applicable just write "N/A"

Printed Complete Name: SOMERA, FROILIE DASALLA
Last Name First Name Middle Name

Nickname/ Alias: FROIE

Complete Home Address: 12 KARILAGAN ST., DONA DOMIANA SUBD, BRGY. ROSARIO, PASIG CITY
(for accuracy of checking, please include the barangay and or zone #/ zone name as necessary)

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The information contained in this application is correct to the best of my knowledge. I, Ms. FROILIE D. SOMERA hereby authorize the National University and its accredited Background Screening partner to conduct a comprehensive background check as part of their recruitment process. I understand that the scope of this background check may include, but not limited to the following areas: my education background, employment, references, credit, criminal, professional licenses, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency to disclose any and all information either verbal or written, pertaining to me, to Prowess Diligent Screening and its verifiers. I further authorize the complete release of any records or data pertaining to me which Prowess Diligent Screening may have, to include information or data received from other sources.

Signature: 

Identification #: PASSPORT NUMBER P0507453C

Date Signed: NOVEMBER 19, 2022