AUTHORIZATION TO RELEASE INFORMATION

I, CHRISTINE 10V P. WORTHOOM, Filipino, of legal age, and with residence address at PURDK Y IBA-IBA-ID HAGONOY, BUL., applying for a SHARED SERVICE ACCOUNTED AT NAMED., I hereby know and understand that as a part of the recruitment process, I shall be subjected to a background investigation commissioned by the company.
I hereby authorize <u>NCSTVE BULINES (PRINCE, ANA</u> and its third party company <u>Sentinel Integrated</u> <u>Services Inc</u> . to conduct background check and verify the information provided in the application form and any institution/s or school/s or concerned person to release my records which shall be limited to the following items;
PERSONAL INFORMATION – Confirmation of personal and family background declared during the application.
EDUCATIONAL ACADEMIC BACKGROUND — Confirmation of school record and standing based on declared Educational Attainment and authentication of the submitted Transcript of record, Diploma and other relevant school documents.
Name of the School/ University : CENTRO ECCOLAR UNIVERSITY - MALOUDS Address : KM 44 MCARTHUR HICHNAY MALDLES BULACALL Course : BS TOURISM MANAGEMENT Date of Graduation : MARCH 31 , 2017
EMPLOYMENT – Verification for all previous work experience including the authentication of submitted certification, clearances and other relevant employment documents.
REFERENCES – Conducting references check relating to my personal attributes and characteristics, job performance, competence and skills and other relevant information.
CRIMINAL & CREDIT CHECK – Verification of possible delinquent accounts, criminal charges and any court cases.
Lastly, I declare that all information provided is true to the best of my knowledge and that any false or malicious information in this application or any omission which is misleading will be sufficient grounds for dismissal upon discovery.
CHRISTINE (100 P) LORENZO Signature over Printed Name
testmerk so, soss. Date Signed