



Authorization for Disclosure of Information

I understand that in connection with my background check being performed by HireRight, LLC ("HireRight"), one or more of the following source(s) are requiring my hand written signature in order to authorize the release of information to HireRight. Accordingly, I hereby authorize all of the following, without limitation, to disclose information about me to HireRight and its agents in connection with its preparation of background reports on me.

- Law enforcement agencies;
- Learning institutions (including public and private schools, colleges and universities);
- Testing agencies;
- Information service bureaus;
- Record/data repositories;
- Courts
- Motor vehicle records agencies;
- My past or present employers;
- The military; and
- Other individuals and sources with any information about or concerning me.

The information that can be disclosed to the consumer reporting agency and its agents includes, but is not limited to, information concerning my employment and earnings history, education, motor vehicle history, criminal history, military service, professional credentials and licenses.

Applicant Last Name _____ First _____ Middle _____

Other Names Used _____

Applicant Signature _____ Date _____