

1. Applicant Information

**Welcome. An employer has requested that you complete a confidential background check as the next step for consideration. You will have an opportunity to review this background check before it's sent to the employer. To begin, please fill out the information below.**

Employee Name \_\_\_\_\_ Social Security # \_\_\_\_\_  
FIRST NAME MIDDLE INITIAL LAST NAME (as shown on SS card)

Aliases / Maiden Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

**Current Address** \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Primary Phone Number \_\_\_\_\_

**Previous Address** \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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Driver's License # \_\_\_\_\_ State Issued \_\_\_\_\_

**Self Admitted Crimes**

If you have ever been convicted of a crime other than a minor offense, please list below (if applicable). At least one location indicator is required (city, county or zip code) and the crime description.

1. Crime Description \_\_\_\_\_

Year \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

2. Crime Description \_\_\_\_\_

Year \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

3. Crime Description \_\_\_\_\_

Year \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

2. Authorization

**Background Check & Investigative Consumer Report Authorization**

In connection with my application and/or continued employment (including contract for services), I understand that investigative background inquiries are to be made on myself including consumer investigative criminal convictions. Further, I understand that you will be requesting information from various Federal, State and other agencies, which maintain records concerning my past activities. I acknowledge that I have been counseled that a person or entity may not procure or cause to be prepared an investigative consumer report or any consumer unless it is clearly and accurately disclosed to the consumer, that an investigative report – including all applicable information as to his or her character, general reputation, personal characteristics, mode of living, education history, driving history (including but not limited to accident history, alcohol/drug and other DOT requirements as permitted by the ADA), employment history and credit history – may be made. If you are denied employment because of the consumer investigation, it is your right under the Fair Credit Reporting Act (Law 91-508) SS 606 to have the name of the agency or agencies from whom information concerning you was obtained. You are also entitled to receive free copies of the information supplied by those agencies within sixty days upon written request. You have the right to directly dispute with the consume reporting agency the accuracy and completeness of any information furnished by that agency.

I authorize without reservation, any party or agency contacted by this employer to furnish the above mentioned information. I release BACKGROUND NETWORK, INC. d.b.a. CRIMCHECK.COM and any other person and/or agencies from an suites, liens, judgments, damage and/or liability resulting from this process. The above information is used solely for inquiries and criminal history checks. Falsifying any information on this release will constitute immediate dismissal or declining any pending job offers.

(REQUIRED) I have read, understanding and agree to the statement above.

(OPTIONAL) By checking this box, I request a free copy of the report.

Signature \_\_\_\_\_ Date \_\_\_\_\_