



Client: please indicate the checks to be performed

Form with checkboxes for Credit, Criminal (state), Criminal (other state/county), Criminal (Federal), Motor Vehicle, Education Verif., Employment Verif., License/Credential Verif., Social Security Number Verif., and Civil Suit Report.

### Disclosure & Authorization

This is our formal notification to you that as part of considering you for employment, a consumer report and/or investigative consumer report may be obtained about you. This process may include verification of education; credit history; employment history; a review of any local, county, state, and federal government agency records; court public records; driving records (MVR), and employment references. Employment references may include information pertaining to your general character and reputation, work habits, and other employment related characteristics. If a credit report is obtained, the source credit bureau will be Equifax Services, Inc. Upon request, a copy of the credit report will be provided to you at no charge.

By signing this Disclosure & Authorization,

- You acknowledge receipt of this Disclosure & Authorization, as well as receipt of A Summary of Your Rights Under the Fair Credit Reporting Act.
You give us permission to obtain a consumer report and/or investigative consumer report on you for employment purposes.

For California, Minnesota, or Oklahoma Applicants:
I request a copy of my consumer reports
e-mail address: \_\_\_\_\_ OR
Mailing address: \_\_\_\_\_

Received and Authorized by:

The following is required to conduct pre-employment verifications. Date of birth and maiden name are not considered in the employment decision. This information is utilized for accurate records verifications only.

Print Last Name \_\_\_\_\_ Print First Name \_\_\_\_\_ Print Middle Name \_\_\_\_\_

I request that this document in its original or copied form serve as my valid authorization to any and all persons, educational institutions, past and/or current employers, organizations, credit reporting agencies, law enforcement or criminal record agencies, and other agencies to release information about me to ChoicePoint Services, Inc., or its designated agent, and hereby release all such persons, institutions, agencies, employers, and organizations providing such information from liability in any or all claims and damages connected with their providing any requested information.

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

Have you ever been convicted, entered a plea of no contest, had prosecution deferred, or adjudication withheld for any crime (other than for minor traffic violations)?  Yes  No

(Will only be considered in relation to specific job requirements.) If yes, please explain: \_\_\_\_\_

**Authorized by Candidate:**

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Maiden name or alias, if applicable

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Driver's License Number and State

\_\_\_\_\_  
Place of Birth

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Home/Work Phone (include Area Code)

Please provide a complete listing of **ALL** addresses (including street address, city, state and zip), that you have occupied within the **past 7 (seven) years**. Use an extra sheet if necessary.

**Please be sure all letters and numbers are legible.**

\_\_\_\_\_  
Current address – #/Street/City/State/Zip  
Number of years at this address \_\_\_\_\_

\_\_\_\_\_  
Previous address - #/Street/City/State/Zip  
Number of years at this address \_\_\_\_\_

\_\_\_\_\_  
Previous address - #/Street/City/State/Zip  
Number of years at this address \_\_\_\_\_

\_\_\_\_\_  
Previous address - #/Street/City/State/Zip  
Number of years at this address \_\_\_\_\_

\_\_\_\_\_  
Jimco Maintenance, Inc  
Client Company

\_\_\_\_\_  
Management Signature/Date

**Fax to the Selective HR Support Center at (941) 753-8302.**