

AUTHORIZATION AND RELEASE

I understand that in connection with my application for employment (including contract and consulting positions), the services of an outside agency, BackIS International, will be used to research and verify the information I have provided on my application and resume (if included) for employment. This process may include verification of employment, salary history, education, driving records, criminal conviction records, civil records, a Social Security Number Track, and other relevant verifications relating to the information that has been declared on the employment application, resume or stated during interviews.

I hereby authorize all previous employers, educational institutions, references, consumer reporting agencies, motor vehicle departments, criminal and civil courts, and persons or entities having information regarding my stated qualifications to release such information. I request, authorize, and consent to the release and disclosure of any and all information to BackIS International.

I understand the necessity for this verification and agree to fully release BackIS International, its employees, officers, directors, agents, successors and assigns, and any other entities that may be involved in obtaining or providing the requested information, from any claim or action for any liability whatsoever related to the process or results of the verification.

I further certify that I, the undersigned applicant, have personally completed this application and take full responsibility for the stated information. I also agree to cooperate in any way with BackIS International and its agents to expedite this verification to its conclusion. This authorization and consent shall be valid in original, fax, e-mail, or copy form.

The below information is required by law enforcement agencies, governmental agencies, and/or educational institutions for identification purposes when checking records. It is confidential and will not be used for any other purpose. BackIS International abides by all FCRA, federal, state and local rules and regulations regarding pre-employment verifications.

Please Print Clearly:

Full Name: First_____Middle_____Last_____

Any other names you have been known by or used_____

Gender: Male___ Female___ Date of Birth (mm/dd/yyyy):_____

Social Security #: _____

Social Insurance #: _____

Drivers License #: _____ Issuing State/Province:_____

Addresses used for the past 7 years starting with the most current:

Street_____City_____

State_____ ZIP_____

From-To Dates: _____ - _____

Street_____City_____

State_____ ZIP_____

From-To Dates: _____ - _____

Street_____City_____

State_____ ZIP_____

From-To Dates: _____ - _____

Applicant's Printed Name _____

Applicant's Signature _____ Date_____