
BACKGROUND INVESTIGATION CONSENT FORM AUTHORIZATION

AUTHORIZATION I hereby give permission to verify the information submitted by me and to conduct a background investigation on me. I understand this may include social security number verification and address history, criminal history, driving history, a credit report, education history, license/certification verification, past employment information, reference checks, and/or any other public records. I authorize the complete release of these records.

Print Name of Applicant

Signature of Applicant

Date