



YOUR EMPLOYMENT REPORT AUTHORIZATION

I understand that Advanced Reporting will be preparing my employment consumer and/or investigative consumer report* on behalf of _____. I understand that this report may include but is not limited to criminal and civil court records, credit history, driving records, educational and professional credentials and personal and professional references. I understand this information may come from public or private sources and may contain information regarding my character, experience, work habits and reasons for termination from past employers.

I authorize all such persons or entities who may possess said information, to release the same to Advanced Reporting in order to complete said report. This authorization shall be valid as of the date below and, if hired, shall continue throughout my employment with the above-mentioned employer. I further understand that use of a photocopy of this form may be necessary to complete this report. I authorize that use, and request that such a copy be honored fully.

I certify that the facts and information in this form and any attachments are true and complete to the best of my knowledge.

Dated this _____ day of _____, 20 _____

Applicant Signature: _____

Print Applicant Name: _____

Other names used (AKA) _____

Social Security #: _____ - _____ - _____ Date of Birth: _____

Drivers License Number: _____ Issuing State: _____

Street Address: _____

City, State, Zip: _____

You are **REQUIRED** to provide all previous residences with the last 7 years. Please list below each residence along with the dates of residence. Please use a separate sheet of paper if necessary, including your signature.

Dates	Residence Address	City	State	Zip

Company Applying with: _____

* As defined by the Fair Credit Reporting Act, 15 U.S.C. § 1681 et seq