

NATIONAL BACKGROUND INVESTIGATIONS, INC.

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APPLICANT RELEASE AND AUTHORIZATION FORM

I hereby authorize KIDS C.A.N. or other authorized representatives of the company bearing this release to obtain and release any information pertaining to my background, including any of the services noted below, for employment or volunteer purposes. I hereby fully release and discharge my prospective employer, other authorized representatives of the company, or other source providing information from all claims and damages arising out of or relating to any investigation of my background for said purposes.

Please Provide Minimum 7 Years of Residential History Below

Name: _____ Alias/Other: _____
(First, Middle, Last – Print Clearly)

Date of Birth: _____ Social Sec. No.: _____

Driver's License No.: _____ State: _____ Signature: _____

[1] Current Address: _____ City/State/Zip: _____

County: _____ Dates/From: _____ To: _____

[2] Previous Address: _____ City/State/Zip: _____

County: _____ Dates/From: _____ To: _____

[3] Previous Address: _____ City/State/Zip: _____

County: _____ Dates/From: _____ To: _____

IMPORTANT: FOR CLIENT USE ONLY – *Please order any of the following:*

Check Alias/Other name: Yes _____ No _____

[1] Criminal Search: Current Address _____ [2] Criminal Search: Previous Address _____

[3] Criminal Search: Previous Address _____

Maryland Statewide _____ Maryland Traffic _____ Social Security Trace _____ MVR _____

Sexual Offender (where available) _____ Wants/Warrants _____ Credit Report _____ FACS Plus _____

Federal Criminal _____ Federal Civil _____ Bankruptcy _____ Workers' Compensation _____

Civil Judgment: Upper _____ Lower _____ Federal Tax Lien _____ State Tax Lien _____

Verification (Specify Number of Items): Education _____ License _____ Employment _____