



Applicant Release Form

Date: _____

Client Company Name: _____

Client Contact Name: _____

Client Contact Phone, E-Mail: _____

Applicant Information (Please print clearly in ink)

Last Name: _____ First, Middle Name: _____
(as shown on Birth Certificate or Social Security Card)

Residence Address: _____

Home Phone: _____ Work Phone: _____

Social Security Number: _____ Driver's License #: _____

E-Mail Address (new requirement): _____

Date of Birth: _____ Driver's License State: _____

Applicant Authorization and Agreement

In connection with any application made by me, I understand that you may be requesting information from various Federal, State, and other agencies which maintain records concerning past activities relating to my credit, criminal, driving, civil, and other records and experiences, including claims involving me in the files of insurance companies, if any. These reports may also include information on education, experience, work habits, and performance, along with reasons for termination of employment from previous employers, if any. I also agree, that should I become an employee, my employer has the right to perform the above searches at any time during my employment.

Without reservation, **I authorize any party or agency contacted** to furnish the above-mentioned information and release all parties involved from any liability and/or responsibility for doing so. I hereby consent to any potential employer obtaining such information from The Nielson Group and any of their agents. This authorization and consent shall be submitted in an original, fax, or copy form.

I have the right to request to The Nielson Group or its agent, upon proper identification and payment of any authorized fees, the information in its files on me at the time of my request. The Nielson Group and its agents do hereby agree to provide the requested information in accordance with the Fair Credit Reporting Act and submit a written report via U.S. mail or fax.

Applicant Signature: _____

Employer: Keep a copy of all applicant release forms for your records for a minimum of 2 years.

Please submit signed release forms with copy of applicant's valid drivers license to The Nielson Group via fax @ 775-667-9320.