

Notice/Authorization and Release For A Consumer Report

I, the undersigned consumer, do hereby authorize _____ by and through its agent, PayMaster, Inc., to procure a consumer report on me.

This report may include, but is not limited to, my personal credit history based on reports from any credit bureau; criminal history/records; my driving history, including any traffic citations; a social security number verification; information discerned through employment and education verifications; present and former addresses; and any other public record.

I further authorize any person, business entity or governmental agency who may have information relevant to the above to disclose the same to _____ by and through PayMaster Inc., including, but not limited to any and all courts, public agencies, law enforcement agencies and credit bureaus, regardless of whether such person, business entity or governmental agency compiled the information itself or received it from other sources.

I hereby release _____, PayMaster, their successors and assigns, and any and all persons, business entities and governmental agencies, whether public or private, from any and all liability, claims and/or demands, by me, my heirs or personal representatives, successors, assigns, or others making such claim or demand on my behalf, for providing a consumer report hereby authorized.

I understand that this Notice/Authorization and Release form shall remain in effect for the duration of my employment with said Company. Additionally, I give permission to investigate any incidents of workplace misconduct or criminal activity for which I might be alleged to have been involved during my employment. Further, I certify that the information contained on this Notice/Authorization and Release form is true and correct and that my application will be terminated based on any false, omitted or fraudulent information.

Signature: _____ Date: _____

Printed Name: _____

First	Middle	Last	Maiden
Other Names Used (previously married names, nickname, aliases, other):			

Current Address:			

Street	City	State	Zip Code
County			
How long at this address: _____			
Former Address:			

Street	City	State	Zip Code
County			
How long at this address: _____			
Former Address:			

Street	City	State	Zip Code
County			
How long at this address: _____			
Date of Birth*: _____		Gender*: _____	
Social Security Number: ____ - ____ - _____			
If NOT a U.S.- BORN citizen: Alien No. A 0 _____			
Document Type (check one): I-551 ____; I-688 ____; I-766 ____			
Or I-94 No.: 94 _____			
Expiration Date on Alien or I-94 Card: _____			
Driver's License Number: _____		State of Issuance: _____	
Driver's License Number: _____		State of Issuance: _____	
Driver's License Number: _____		State of Issuance: _____	
Tag No. or Vehicle ID No. _____			
College or University: _____		Degree(s): _____	
City and State of College or University: _____			
Years Attended*: _____		Year Graduated*: _____	
Previous Employment (start with most recent):			
Employer: _____		Dates Employed: _____	
Phone Number of previous employer: _____		Supervisor: _____	
Employer: _____		Dates Employed: _____	
Phone Number of previous employer: _____		Supervisor: _____	
Employer: _____		Dates Employed: _____	
Phone Number of previous employer: _____		Supervisor: _____	
Have you ever had your license(s) suspended or revoked?			
Yes ___ No ___			
Have you ever been convicted of a crime?			
Yes ___ No ___			
Are you currently under any investigation or pending charge?			
Yes ___ No ___			
* Date of birth, graduation date, years attended school and gender on this Notice/Authorization and Release form are for identification purposes only. They will not be used to make an employment decision.			