

**APPLICANT'S AUTHORIZATION FOR RELEASE OF INFORMATION**  
**THIS FORM TO BE COMPLETED AND SIGNED BY JOB APPLICANT**

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IN CONNECTION WITH, AND DURATION OF MY EMPLOYMENT (INCLUDING CONTRACT FOR SERVICES) WITH YOU, I UNDERSTAND THAT INVESTIGATIVE BACKGROUND INQUIRES ARE TO BE MADE ON MYSELF THAT MAY INCLUDE CONSUMER, CRIMINAL, DRIVING, ACADEMIC AND OTHER REPORTS. THESE REPORTS WILL INCLUDE INFORMATION AS TO MY CHARACTER, WORK HABITS, PERFORMANCE AND EXPERIENCE.

FURTHER, I UNDERSTAND THAT YOU MAY BE REQUESTING INFORMATION FROM VARIOUS FEDERAL, STATE AND OTHER AGENCIES WHICH MAINTAIN RECORDS CONCERNING MY PAST ACADEMIC, EMPLOYMENT (including WORKER'S COMPENSATION CLAIMS), DRIVING, CREDIT, CRIMINAL, AND CIVIL HISTORIES AND OTHER EXPERIENCES.

I AUTHORIZE, WITHOUT RESERVATION, ANY PARTY OR AGENCY CONTACTED BY THIS EMPLOYER OR ITS AGENT, INFO QUEST, INC. TO FURNISH THE ABOVE INFORMATION:

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PRINT FULL NAME \_\_\_\_\_

PREVIOUS LAST NAMES \_\_\_\_\_

SOC. SEC. NO. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

(DOB IS REQUESTED TO INSURE ACCURATE RETRIEVAL OF RECORDS.)

CITY AND STATE OF BIRTH \_\_\_\_\_

DRIVER'S LICENSE NO. \_\_\_\_\_ STATE OF ISSUE \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

PREVIOUS ADDRESS IF AT ABOVE FOR LESS THAN ONE YEAR:

CITY, STATE, ZIP \_\_\_\_\_

PROSPECTIVE EMPLOYER: \_\_\_\_\_

REQUESTOR: \_\_\_\_\_

RETURN FAX 843-233-9676/800-588-1152 OR EMAIL [suthers@sc.rr.com](mailto:suthers@sc.rr.com)

**INFO QUEST, INC.**

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