Authorization to Release Information

I understand that employment with Elite Home Cleaning is of a nature that requires background checks for evaluation purposes. I also understand that any misrepresentation, falsification or omission of facts herein may be grounds for disqualification, release or dismissal.

APPLICANT INFORMATION:

	Last	First	Mid	ddle
Address: Street Name & Number		City	State	Zip Code
How long at above address				
ate of Birth		Social Security #		
Home Phone		Mobile Phone		Email
	? You may omit co	onvicted of a felony or fe nviction of a misdemear (Yes)		
-		M		
-	, location and explana	tion:		
yes, please indicate date		tion:		

I hereby authorize EHC to request and receive any and all background information about or concerning me, including but not limited to my Criminal History, Credit History including a consumer

report under the Fair Credit Reporting Act, 15 U.S.C 1681, Driving Record, Employment History, Military Background, Professional License, and other entities including my present and past employers.

I further release and discharge EHC from any and all claims and liability arising out of any request for information or records pursuant to this authorization, procurement of an investigative consumer report and understand that it may contain information about my character, general reputation, personal characteristics, and mode of living, whichever are applicable.

I hereby certify that all statements on this application are true and correct to the best of my knowledge and belief.

Applicant/Employee Signature	Date