



Background Check Release Form

_____	_____	_____
Full Name	Position Applied For	Social Security Number
_____	_____	_____
Date of Birth	Sex	Race
_____	_____	_____
Driver's License Number	State	County
_____	_____	
Email (required for notification)	Other names you have used (include maiden name, if married)	

Please provide all residential addresses for the past 7 years (place additional addresses on back)

Current: _____

Street	Apt #	City	State	Zip Code	How long here?
--------	-------	------	-------	----------	----------------

Former: _____

Street	Apt #	City	State	Zip Code	How long here?
--------	-------	------	-------	----------	----------------

Former: _____

Street	Apt #	City	State	Zip Code	How long here?
--------	-------	------	-------	----------	----------------

Former: _____

Street	Apt #	City	State	Zip Code	How long here?
--------	-------	------	-------	----------	----------------

May we contact your current employer? _____ Yes _____ No

I hereby authorize Michindoh and/or Camp Background Checks to request and receive any and all background information about or concerning me, including but 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, Civil Listings, Educational Background, Professional License from any Individual, Corporation, Partnership, Law Enforcement Agency, and other entities including my Present and Past Employers.

I further release and discharge Michindoh and their agent, Camp Background Checks and all of their Subsidiaries, Affiliates, Officers, Employees, Contract Personnel, or Associates, 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 understand that I have the right to make written request within a reasonable period of time to Michindoh or Camp Background Checks (at 1200 NW South Outer Road, Suite 319, Blue Springs, MO 64015) for additional information concerning the nature and scope of investigation. I acknowledge that I have voluntarily provided the above information for employment purposes, and I have carefully read and understand this authorization.

_____	_____
Signature	Date

OFFICE USE ONLY	
_____ Motor Vehicle Report	_____ Credit Report
_____ Criminal Search (State of _____)	_____ Social Security Trace