

RELEASE FOR BACKGROUND CHECK(S)

Last Name:	First:		Middle	:	
Other Names/Maiden/Alias					
Social Security#	Date of Birth				
Driver's License #		State			
Phone #					_
Email					
Present Address					
City		State_		_Zip	
County					
This information will be use	ed for backgroun	d screening pu	rposes only an	nd will not be us	ed as hiring criteria.
[Note: If you do business is offer of employment or at the				eense, or SSN ur	ntil either a confidentia
Applicant Signature:		Date:			
For	employer Use On	ılv [.] Please mark	· (✓) the search	es to be conducted	1
Contact: Rhonda Mcdar	nly: Please mark (✓) the searches to be conducted. Email:Rhondamcdaniel@independenthumanservices.com				
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Phone: 252-635-94		Fax: 252-635-9495			
					10/17/2023