



TRANSPARENT
INFORMATION SERVICES

METRO SUPPORT
SUBJECT RELEASE AND AUTHORIZATION

Transparent Information Services, LLC (TIS) is hereby authorized to conduct a background investigation on me in the course of consideration for possible employment by Metro Support. I voluntarily and knowingly authorize, without reservation, any duly authorized agent of TIS to obtain from any law enforcement agency, drug screening firm state, county or federal agency, present employer or supervisor, landlord, past employer or supervisor, finance bureau/office, credit bureau, collection agency, college, university or other institute of learning or certification, private business, military branch or the National Personnel Records Center, personal reference and/or other persons, and voluntarily and knowingly authorize the same to give, records or information that they may have concerning my criminal history, motor vehicle history, earnings history, credit history, character, employment records, record of attendance and earned degrees or certificates, or any other information requested, whether the said records are public or private, and including those which may be deemed to be privileged or confidential in nature and I voluntarily, knowingly and unconditionally release all such persons, including any named or unnamed informant, from any and all liability resulting from the furnishing of this information. A photographic, faxed or e-mailed copy of this authorization shall be as valid as the original.

Transparent Information Services, LLC is only an information provider and does not make hiring decisions

PROVIDE THE FOLLOWING INFORMATION / PLEASE WRITE LEGIBLY AND IN BLACK INK

FULL NAME: _____

FORMER/MAIDEN/ALIAS/OTHER NAMES USED: _____

POSITION FOR WHICH YOU ARE APPLYING: _____

ADDRESS HISTORY FOR THE MOST RECENT 7 YEAR PERIOD (USE AN ADDITIONAL SHEET IF NEEDED):

ADDRESS	CITY/STATE/ZIP CODE	COUNTY	DATES OF RESIDENCE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

DRIVER'S LICENSE NUMBER: _____ **STATE:** _____

NAME AS IT APPEARS ON LICENSE: _____

SOCIAL SECURITY NUMBER: _____

DATE OF BIRTH (MANDATORY): _____ **SEX:** _____ **RACE:** _____

****THE INFORMATION PROVIDED ABOVE IS FOR THE PURPOSES OF INITIATING A BACKGROUND CHECK AND WILL NOT BE USED BY THE PROSPECTIVE EMPLOYER IN THE HIRING DECISION****

I understand that the information that I have provided is for the purposes of a background check only and that TIS, LLC is not the Employer but a background screening company, not owned or operated by the Employer. I further acknowledge that my date of birth, sex and race are to be used for investigative purposes by TIS, LLC where this search criteria may be required by certain agencies listed in the top paragraph of this form and shall not be used for the purpose of making a hiring decision.

CALIFORNIA, OKLAHOMA, and MINNESOTA RESIDENTS ONLY: If you are a current California, Oklahoma, or Minnesota resident and would like to request a copy of your Consumer Report or Investigative Report, please check the box. This report may include character and reputation information obtained through personal interviews.

Signature: _____ **Date:** _____