

**Kindred Consulting, LLC.**

**Background Check Consent Form**

Thank you for your interest in employment at Kindred Consulting, LLC. As part of the hiring process, certain information may be requested as it relates to the position for which you have applied. Your signature on this document indicates that you have read and understand the conditions set forth by Kindred Consulting, LLC.

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I understand that **Kindred Consulting, LLC** will perform an employment background check to determine my suitability for employment; I hereby authorize the Kindred Consulting, LLC to secure the information necessary to make such a decision. I further understand that while an offer of employment will precede any such investigation, employment is contingent upon a determination of my suitability for the position I've been offered.

I certify that I will provide the Kindred Consulting, LLC acceptable documents on my first day of employment that show that I am legally permitted to work in the United States.

By signing this document, I authorize the Kindred Consulting, LLC to conduct a background investigation. I also certify that the information provided in my resume and/or application is accurate, and I understand that any information falsely provided will be sufficient grounds for the immediate termination of my employment.

I hereby authorize the release of the information related to this review, and further release from liability any and all individuals and organizations who provide information Kindred Consulting, LLC concerning my professional competence, ethics, character, driving record, criminal record (if any), and qualifications and authorize my prior employers to release any such requested information about my employment.

**Please note: You will not be considered for employment if you do not provide the authorization for Kindred Consulting, LLC to conduct the background investigation identified above.** Date of birth and Social Security number will be used only to complete the background check and will not become part of the selection process.

Legal Name (Print) \_\_\_\_\_  
(First) (Middle) (Last)

Name  
(Maiden/Alias) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security No. \_\_\_\_\_

Address  
\_\_\_\_\_  
Street City, State, Zip

Driver's License # \_\_\_\_\_

Previous  
Addresses within  
the past three  
years:

\_\_\_\_\_ to \_\_\_\_\_  
Street City, State, Zip Dates of Residence

(Federal Law prohibits discrimination against persons age 40 and over. Date of birth is used for verification purposes only and is not released to the hiring official prior to an individual's acceptance of employment. All criminal history report information is restricted to administrative officers with hiring responsibilities).