**Background and Reference Check Release Form**

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| I, |  | , hereby authorize **EAG** and |
| its agents to make investigations and inquires into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquires connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services or other entities provided on my employment application. Furthermore, I authorize the company and its agents to release any reference information to prospective employers who request such information for purposes of evaluating my credentials and qualifications.  I also authorize EAG to request, review, and obtain driving and vehicle information through Virginia’s Department of Motor Vehicles at time employment is offered and ongoing thereafter.  I acknowledge that I have read this authorization and release, fully understand it, and voluntarily agree to its provisions. | | |

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|  |  | |  | | |  |  |
|  | *Employee signature* | | |  |  | *Date* |  |
|  |  | | |  |  |  |  |
|  | *Printed Name* | | |  |  | *Driver’s License #* |  |