



**AUTHORITY TO RELEASE INFORMATION**

To: Any person having knowledge of my conduct or activities, or any past, present or future Employer, Credit Bureau, Bank, Financial Institution, Dean, Registrar, Principal, Counselor, Instructor, or School, Law Enforcement Agency, Government Agency or Armed Forces:

I, \_\_\_\_\_ hereby authorize StarPoint Screening through its agents, to conduct an appropriate background investigation of me and prepare a consumer report or investigative consumer report which may be used as a factor in determining my eligibility for employment, promotion or retention as governed by the Fair Credit Reporting Act Public Law 91-508. I understand this report may include information from personal interviews about my character, general reputation, personal characteristics and mode of living as well as public and private sources including but not limited to the acquisition of criminal records, employment records, school records, driving records or abstracts, etc. I further understand the information contained in my credit report may be used as a factor in any employment decision. I authorize all persons who may have information relevant to this investigation to disclose it to StarPoint Screening and its agents, and I release all persons from any liability on account of such disclosure. I hereby further authorize that a photocopy of this authorization may be considered as valid as an original.

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

Furnished for the purpose of positive identification: (Print Clearly)

Last: \_\_\_\_\_ First: \_\_\_\_\_ MI: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

A.K.A. (include maiden name): \_\_\_\_\_

SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Driver License #: \_\_\_\_\_ State: \_\_\_\_\_

Address History (Past 7 Years)

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