



## Background Check Permission

I hereby authorize all companies, credit agencies, schools, government agencies, and other people to release information they may have about me to Staff Patrol or its agents and release all persons or companies from any liability from doing so. Further, I authorize the procurement of a criminal background check, and/or state driving record, and/or a consumer credit check report. I understand that such a report may contain information about my background and personal reputation. I understand that this notice will also apply to any future update reports that may be requested. I understand that I have rights under the Fair Credit Reporting Act and that detailed information is available at the Federal Trade Commission website.

Full Name: \_\_\_\_\_  
*First Middle Last*

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Drivers License #: \_\_\_\_\_

Address: \_\_\_\_\_ How long at this address? \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Past Address: \_\_\_\_\_ How long at this address? \_\_\_\_\_  
*If less than 2 years ago*

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

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

**Fax this completed form to (800) 383-1327.**