

AUTHORIZATION TO RELEASE INFORMATION

The purpose of this form is to notify you that a criminal background report will be run on you in the course of consideration for employment:

Southwest Conservation Corps

Please Print or Type

Last Name _____ First _____ Middle _____

Maiden Name / Other Names Used: _____ Date Changed _____

Social Security # _____ Date of Birth _____ Age _____

Driver's License Number _____ State of Issue _____

Please provide 7 years of address history.

Present Address _____ From _____ To _____
City State Zip Code

Previous Address _____ From _____ To _____
City State Zip Code

Previous Address _____ From _____ To _____
City State Zip Code

Previous Address _____ From _____ To _____
City State Zip Code

In connection with this request, I authorize all law enforcement agencies, city, state, county and federal agencies, military services and persons to release information they may have about me to the person or company with which this form has been filed, or their agent, Intellicorp Records Inc. This releases the aforesaid parties from any liability and responsibility for collecting the above information.

I authorize the release of my criminal records, and also the release of my motor vehicle driving records maintained by law enforcement agencies, city, state, county and federal courts, or any other state or local agency, to the person or company with which this form has been filed or their agent, Inc or Intellicorp Records Inc. In addition, I authorize Southwest Conservation Corps to perform a National Sex Offender check.

This releases the aforesaid parties from any liability and responsibility for collecting the above information. I understand that these files may contain negative information about my background, mode of living, character, and personal reputation. This authorization, in original or copy form, shall be valid for this and any future reports or updates that may be requested.

_____/_____/_____
Applicant's Signature Date