

## **Disclosure and Release Form**

ره هما: سمار اسميم برسمانة باسمانة اسميستاسير واسمي		( COIII	
	gents may conduct an investigation of n lates of previous/current employment, v		
	al and other agencies), motor vehicle r		
	ecords. I understand that these record		
	full release of these records and for V	erity Screening Solutions and/	or its agents contacted by
Verity Screening Solutions to obta			
•	arge Verity Screening Solutions, and a	<del>-</del>	
	r charges or complaints for the invest	-	
information described above,	, without any reservation, thro	ughout any duration of	my employment at
	("company/customer name"). I al	lso certify that all information	provided is correct on the
application and my resume to t	the best of my knowledge. Any false	statements provided will be	considered just cause for
termination of employment. Upor	n Request, Verity Screening Solutions v	vill supply a copy of my repor	t and my rights under the
	ts may be directed to: Verity Screening		
CO 80122 or by contacting us at :	1-888-883-7489.		
-	< Please Prin	nt >	
Applicant's Name:			
Applicant's Name:	First	M.I.	Last
Applicant's Name:		M.I.	Last
	First		
	First	M.I.  Date:mm/	
Signature:	First	<b>Date:</b> mm/	dd/ yy
Signature:	First	<b>Date:</b> mm/	dd/yy
Signature:mm/	First	Date:mm/ only criminal and driving recor	dd/ yy
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Signature:mm/ Date of Birth:mm/ Social Security Number: Driver's License Number:	dd/ yyyy (this is used for	Date:mm/ only criminal and driving recor State:	dd <b>/</b> yy
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Social Security Number:  Driver's License Number:  Current Address:	Firstdd/ yyyy (this is used for	Date:mm/ only criminal and driving recorState:	dd/yy

Verity Screening Solutions 6834 S. University Blvd. Suite 506 Centennial, CO 80122 Tel: 1-888-883-7489