

E-EmploymentScreening™ Returning Client Order Form

To order, simply print and complete this Form and fax all three Sections to: 800-301-8049. This will complete your order.

You will receive a confirmation email within one business day and your completed E-EmploymentScreening™ report will be posted to a secure web page for your review within 1-3 business days.

Future orders? Please go to E-EmploymentScreening.net™ and click on "Returning Client Order Form" (the blue button on left side of page).

SECTION I. ORDERING INFORMATION

YOUR COMPANY: _____

ACCOUNT NUMBER: _____

REQUESTER : _____

DATE OF REQUEST (XX/XX/XXXX): _____

REQUESTER'S TELEPHONE NO: _____

REQUESTER'S EMAIL: _____

POSITION CANDIDATE'S NAME: _____

PLEASE SELECT:

- E-EmploymentScreening™** (\$77 First Order, \$110 Regular Price)
- Add Candidate Complete Driving Record (\$25)
- Add Candidate Credit Report (\$30)

IMPORTANT REMINDER TO EMPLOYERS:

Please have your Applicant complete "Section II. Applicant Authorization Form" (below). Also, please supply "Employer Information" at bottom of Section II page.

Your applicant must also complete "Section III. Verification Data Form" (below), or alternatively, you can simply submit his/her resume or completed job application.

SECTION II. APPLICANT AUTHORIZATION FORM

In connection with, and during my employment with you, I understand that investigative background inquiries are to be made on myself that may include consumer, criminal, driving, academic, and other reports. These reports will include information as to my character, work habits, performance, and experience, along with reasons for termination of past employment from previous employers. Further, I understand that you may be requesting information from various federal, state, and other agencies which maintain records concerning my past academic, employment, driving, credit, criminal, civil, military service, and other experiences.

I authorize, without reservation, any party or agency contacted by this employer to furnish the above information.

APPLICANT'S SIGNATURE: _____ DATE: _____

PRINT FULL NAME: _____

PREVIOUS LAST NAMES: _____

SOC. SEC. NO _____ - _____ - _____

DATE OF BIRTH (requested to insure accurate retrieval of records) : _____

CITY AND STATE OF BIRTH: _____

DRIVER'S LICENSE NO. : _____

CURRENT ADDRESS: _____

CITY, STATE AND ZIP : _____

PREVIOUS ADDRESS (if at above for less than one year): _____

EMPLOYER INFORMATION

SUBMITTED FOR (APPLICANT NAME) : _____

REQUESTER: _____

EMAIL: _____

COMPANY: _____

For verification purposes, please have your applicant complete the following Verification Data Form (below) and include this form with the Applicant Authorization Form. Alternatively, you may simply submit your applicant's resume or job application in lieu of the Verification Data Form.

Fax Toll-Free to: 800-301-8049

SECTION III. VERIFICATION DATA FORM

Please provide the following information for verification purposes, if applicable. Note that if providing Education data, Year of Grad is required. If providing Employer data, Company's or Supervisor's Phone Number is required.

APPLICANT'S NAME: _____

EDUCATION:

COLLEGE: _____ YEAR OF GRAD: _____

MAJOR: _____ DEGREE: _____

PROFESSIONAL LICENSE:

LICENSE: _____ LICENSE NO: _____

ISSUING AGENCY: _____ STATE: _____

PREVIOUS EMPLOYERS:

EMPLOYER _____ SUPERVISOR: _____

POSITION HELD _____ SUPERVISOR PHONE: _____

ADDRESS _____

DATES OF EMPLOYMENT: FROM _____ TO: _____

EMPLOYER _____ SUPERVISOR: _____

POSITION HELD _____ SUPERVISOR PHONE: _____

ADDRESS _____

DATES OF EMPLOYMENT: FROM _____ TO: _____

EMPLOYER _____ SUPERVISOR: _____

POSITION HELD _____ SUPERVISOR PHONE: _____

ADDRESS _____

DATES OF EMPLOYMENT: FROM _____ TO: _____

EMPLOYER _____ SUPERVISOR: _____

POSITION HELD _____ SUPERVISOR PHONE: _____

ADDRESS _____

DATES OF EMPLOYMENT: FROM _____ TO: _____

EMPLOYER _____ SUPERVISOR: _____

POSITION HELD _____ SUPERVISOR PHONE: _____

ADDRESS _____

DATES OF EMPLOYMENT: FROM _____ TO: _____

OTHER VERIFICATION DATA OR COMMENTS:

Fax Toll-Free to: 800-301-8049