

NATIONAL BACKGROUND INVESTIGATIONS, INC.

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APPLICANT RELEASE AND AUTHORIZATION FORM

I hereby authorize SAMUEL FIELD YM & YWHA, INC. or other authorized representatives of the organization bearing this release to obtain information regarding my criminal history background for employment or volunteer purposes. I hereby direct you to release such information upon request of SAMUEL FIELD YM & YWHA, INC. or other authorized representatives of the organization.

I hereby fully release and discharge my prospective employer or other authorized representatives of said organization from all claims and damages arising out of or relating to any investigation of my background for employment or volunteer purposes.

Please Provide Minimum 7 Years of Residential History Below

Name: _____ Other/Alias: _____
(First, Middle, Last - Print Clearly)

Date of Birth: _____ Social Sec. No.: _____

Driver's Lic. No.: _____ State _____ Signature: _____

(1) Current Addr: _____ City/State: _____

County: _____ Dates/From: _____ To: _____

(2) Previous Addr: _____ City/State: _____

County: _____ Dates/From: _____ To: _____

(3) Previous Addr: _____ City/State: _____

County: _____ Dates/From: _____ To: _____

Witnessed by: _____ Date: _____