

# GUILFORD COUNTY SCHOOLS RELEASE OF INFORMATION FORM

The purpose of this form is to notify you, in accordance with present federal law, that a background report, including a criminal records check, will be obtained on you in consideration for employment and/or in the course of your employment with the Guilford County Schools. I understand that the information below regarding sex, race and date of birth is requested for the sole purpose of gathering the above information correctly, and will not be used to discriminate against me in violation of any law.

Last Name: \_\_\_\_\_ First: \_\_\_\_\_

Middle: \_\_\_\_\_ Other (Maiden, Aliases, etc.): \_\_\_\_\_

Present Address: \_\_\_\_\_ Social Security #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

DOB: \_\_\_\_\_ Race: \_\_\_\_\_ Gender: \_\_\_\_\_ Phone: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State of Issue: \_\_\_\_\_

In consideration with this request, I authorize all corporations, former employers, credit agencies, education institutions, law enforcement agencies, city, state, county and federal courts, and military services to release information about my background, including but not limited to, information about my employment, education, consumer credit history, driving record, criminal record, and general public record history, to the person or company with which this form has been filed, or its agents. This releases the aforesaid parties from any liability and responsibility for collecting the above information. I understand I have the right to make a request of the Consumer Reporting Agency, upon proper identification and the payment of any authorized fees, the information in its files on me at the time of my request. I further authorize ongoing procurement of the above-mentioned reports at any time during my employment (or contract).

**Starting with your current address, please list all addresses you have had for the past 7 years. For each address listed, indicate all names used at that residence.**

<u>Name</u>	<u>Street</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	<u>Dates (mm/Year)</u>
_____	_____	_____	_____	_____	From:_____ To:_____
_____	_____	_____	_____	_____	From:_____ To:_____
_____	_____	_____	_____	_____	From:_____ To:_____
_____	_____	_____	_____	_____	From:_____ To:_____
_____	_____	_____	_____	_____	From:_____ To:_____

**Position nominated for:** \_\_\_\_\_

**Location:** \_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_