



MINUTEMAN SERVICES, INC.

Springfield, OR 97478
Phone 541-744-0683
Fax 541-747-8076

Background Consent Form

Full Name: _____ (First, Middle, and Last)

Street Address: _____ (Include unit or space #)

City: _____ State: _____ Zip Code: _____

Additional States Lived/Worked In: _____

Other Names Used: _____

Social Security Number: _____ - _____ - _____

Driver's License Number: _____ (Include state issued)

Date of Birth: _____ / _____ / _____

School: _____ Years Completed: _____ Graduated: Y or N

Degree(s) Received: _____ Date Degree Received: _____

I hereby consent and authorize Minuteman Services, Inc., and any of its agents, including Bemrose Consulting, Inc., to secure information pertaining to my character and background, including my criminal history, employment, education, and credit report. I understand that the information supplied by me will be utilized in conducting a comprehensive background investigation, which may include, but is not limited to, a consumer credit report, as well as the verification of the information supplied by me on this or any other application form. I release from liability any and all persons, companies, and corporations that supply information about my history as a result of this investigation.

(Signature of applicant)

_____/_____/_____

(Date)