



Full Executive Staff Screening Request

Organization Name Here

Contact Person:

Phone: _____ Fax: _____

Email: _____

Type of Service: Full Executive Staff Screening-Consent to perform verification of criminal records, credit, driving records, education and degree verification and previous employment history.

Requesting Information On:

Applicant Name: _____

Address: _____

SS#: _____ Date of Birth (DOB): _____

Driver License #: _____ State Issued: _____

1. Secondary Education (College, University, Seminary, etc)

Name and Phone #: _____

City, State College: _____ Years Attended: _____

Degree Y I N ? _____ Major _____

2. Secondary Education (College, University, Seminary, etc.)

Name and Phone #: _____

City, State College: _____ Years Attended: _____

Degree Y I N ? _____ Major _____

3. Current Employer (May we contact?) _ yes _ no

Employer Name: _____

Supervisor/HR Contact: _____

Phone (Employer): _____ Fax (Employer): _____

4. Previous Employer Information:

Supervisor/HR Contact: _____

Phone (Employer): _____ Fax (Employer): _____

5. Home Addresses including county name for the last seven (10) years: a.

County _____ State _____

b. _____

County _____ State _____

c. _____

County _____ State _____

d.

County _____ State _____

Full Executive Staff Screening Request Authorization

Authorized By Applicant Please Sign:

Signature

Date

Printed Name

Employer/Organization - Please Fax To:
Trak-1 Technology Background Checks

Fax 1-888-743-7668

Phone 1-800-600-8999

NOTES:

