

NATIONAL BACKGROUND INVESTIGATIONS, INC.
P.O Box 996, Stevensville, Maryland 21666
Telephone No. 410-604-2430/ Facsimile No: 410-604-2496

APPLICANT RELEASE AND AUTHORIZATION FORM-WR

I hereby authorize Athelas Institute, Inc. or authorized representative of the company bearing this release in obtain and release any information pertaining to my background, including any of the services noted below, for employment purposes. I hereby fully release and discharge my prospective employer or other source providing information from all claims and damages arising out of or relating to any investigations of my background for said purposes. PLEASE PROVIDE MINIMUM 7 YEARS RESIDENTIAL HISTORY.

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

Date of Birth: _____ Social Security Number: _____ - _____ - _____

Driver's License Number: _____ State: _____ Signature: _____

(1) Current Address _____ City/State _____

County _____ Dates/From _____ To _____

(2) Current Address: _____ City/State: _____

County _____ Dates/From: _____ To _____

(3) Current Address: _____ City/State: _____

County: _____ Dates/From: _____ To _____

Witnessed By: _____ Date/From: _____ To _____

IMPORTANT: FOR CLIENT USE ONLY-MARK AN X FOR ANY OF THE FOLLOWING:

Would you like NBI to also check Alias/Other name given? Yes _____ No _____
(Be advised there is an additional charge per alias name)

Criminal History Record Search:

(1) Current Address _____ (2) Previous Address _____ (3) Previous address _____

Maryland (Statewide) Criminal Search _____ Maryland Traffic Court Search _____

Motor Vehicle Report (Driving Record) _____ Social Security Number Trace _____

Sex Offender Registry _____ Wants/Warrants _____ Credit Report _____

Bankruptcy _____ Federal Criminal _____ Federal Civil _____

Federal Tax Lien _____ State Tax Lien _____ Worker's Compensation _____

Civil Judgement: Upper Court _____ Lower Court _____

Verification (Specify Number of Items): Education _____ License _____ Employment _____