



Inquiry Release Form Employee/Applicant Information

Name: _____
Last First Middle

Other Names Used: _____
Last First Middle

Present Address: _____
Street City State Zip

Years lived at present address: _____ Telephone Number _____

Previous Address: _____
Street City State Zip

Years lived at previous address: _____ Telephone Number _____

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

Drivers License Number: _____
State Number

In consideration for processing my application for employment, or while I am employed at American Federal for promotion, transfer, retention or any other work-related reason, I hereby authorize American Federal to receive information concerning my employment suitability and qualification. This may include information on my past employment and education, criminal records, credit history, motor vehicle records, personal references and other job-related data. I understand American Federal may utilize the services of an outside agency to obtain a background and/or consumer report with the above information and I authorize American Federal to do so. I understand I have the right to request from the consumer reporting agency additional information about the nature and scope of the report. I request and authorize the appropriate individuals, companies, institutions or agencies to release information to a consumer reporting agency and to American Federal and I release them from any liability as a result of such inquiries or disclosures. I also release American Federal and the consumer reporting agency from any and all liability with respect to the release or dissemination of any such information. I understand and agree that my employment, promotion, transfer or retention may be determined in whole or in part based on reports issued to American Federal.

Signature Date

[] I would like to receive a copy of the consumer report if one is generated in connection with this authorization.