



AUTHORIZATION FOR RELEASE OF INFORMATION

I hereby authorize Blue Mountain, LLC (“BMP”) and its designated agents and representatives to conduct a comprehensive review of my background through a consumer report and/or an investigative consumer report to be generated for employment, promotion, reassignment or retention as an employee. I understand that the scope of the consumer report/investigative consumer report may include, but is not limited to the following areas: verification of social security number, current and previous residences, employment history including all personnel files, education, character references, credit history and reports, criminal history records from any criminal justice agency in any or all federal, state county jurisdictions, motor vehicle records to include traffic citations and registration and any other public records.

I authorize the complete release of these records or data pertaining to me which an individual, company, firm, corporation, or public agency may have. I understand that I must provide my date of birth (month and day only) to adequately complete said screening, and acknowledge that my date of birth will not affect any hiring decisions. I hereby authorize and request any present or former employer, school, police department, financial institution or other persons having personal knowledge of me, to furnish bearer with any and all information in their possession regarding me in connection with an application for employment. This authorization and consent shall be valid in original, fax, or copy form.

I hereby release BMP, and its agents, officials, representatives, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may at any time, result to me because of compliance with this authorization. You may contact me as indicated below; I understand that a copy of this authorization may be given to me at any time, provided I request it in writing. Information on this application and results of the background investigation will be maintained in confidence in accordance with company hiring practices.

Name: _____
 First Middle (full name) Last Maiden

Signature: _____ Date: _____

Print All Former Names Used: (Maiden or AKA)

Last First Middle

Last First Middle

Last First Middle

Current Street Address: _____

City: _____ State: _____ Zip: _____

Print Residences in the previous 7 years (City, State & Zip Code)

City: _____ City: _____

State: _____ Zip: _____ State: _____ Zip: _____

City: _____ City: _____

State: _____ Zip: _____ State: _____ Zip: _____

City: _____ City: _____

State: _____ Zip: _____ State: _____ Zip: _____

SSN: _____ - _____ - _____

Month of Birth: _____ Day of Birth: _____ **Do Not Provide Your Year of Birth**

Drivers License Number: _____ Issuing State: _____

May we contact your current employer? Yes No

Have you been convicted of a felony, misdemeanor, or traffic infraction? Yes No

If yes, please explain and include dates and locations (please use extra pages if necessary):

Home Phone Number: _____ Cell Phone Number: _____

Email Address: _____@_____

Initial: _____