BACKGROUND INVESTIGATION AUTHORITY

I hereby authorizeThe Vine Home to investigate my background to determ record or not, and I release employers resulting from his/her furnishing said in	nine any and all in and persons name	formation o	of concer	n to my re	cord, whet	her same is o	
Additionally, I hereby authorize any invidriving history, educational background any references provided by me or ascerintegrity, general character, and any otinformation by the appropriate agencies compensation claims search after a conductor and the desired compensation claims.	I, military record, or rtained by investig ther job specific inf s to the investigation aditional job offer h	criminal rec ation, to re formation re ing service.	ords and lease inf equested I under	I I also aut ormation a I. I author stand this	horize pre bout my p ize the rele may includ	vious employe erformance, ease of this de a workers	ers, an
This authorization, in original or copy for requested.	orm, shall be valid	for this and	d for any	future rep	orts and u	pdates that m	ay be
requested.	PLEASE PR	RINT CLEA	RLY				
Full Name:		SSN:	l				
Other Names or SSN Used:							
Current Street Address:					Apt.:		
City:			State	:	Ziŗ	o:	
Phone: ()							
Driver's License#: *DOB and SSN is only used for identification	n purposes in screenia	State	::	*DOB:	/	_/	
Best Telephone Contact #*: () *These will only be used by SingleSource if it	Ema	ail Address	*: complete	your report		@	
LIST ALL ADDRESSES FOR PAST 7 Y	′EARS: (□check	here if mo	re on re	everse or	resume a	ttached)	
				DATES:			
Street Address	City	State	Zip		from	to	
Street Address	City	State	Zip	DATES:			
MAY WE CONTACT YOUR CURRENT	•	□YE		□no			
HAVE YOU EVER BEEN CONVICTED This includes but is not limited to pleas intervention programs. If YES show deconsidered based upon the type of offer	of guilty, nollo con tails including date	e, charge, co	contest ounty, di	sposition o	n reverse.	Convictions a	are
Signature:				DATE: _	/		
If you are a resident of <u>C</u> you may request a cop □ YES – please provide rep o	y of any "consume	er report" o	btained l	by us by in	dicating be	elow:	
For The Vine Ho	me Schooling	g Co-Op	Offi	ce Use	ONLY		
Please log in to www.s	<u>singlesourceser</u>	vices.cor	<u>n</u> to en	ter subje	ct for so	reening(s).	
SingleSource Services 1-800-713-3412							
Client Reference:		Date	e Requ	iested: _			