

HIRE IMAGE LLC  
EMPLOYMENT AUTHORIZATION FORM

The following information is to be used to assess my employment application with \_\_\_\_\_  
(Enter company name)

Please Print

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**May we contact your current employer? Yes  No  (If this question is not answered or a current employer is not identified we will contact all employers listed)**

_____ Company Name	(current employer Yes <input type="checkbox"/> No <input type="checkbox"/> )
_____ Dates of Employment	_____ Position/Duties
_____ Address	_____ Salary
_____ Supervisor/Contact	_____ Telephone Number

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_____	(current employer Yes <input type="checkbox"/> No <input type="checkbox"/> )
Company Name	
_____	_____
Dates of Employment	Position/Duties
_____	_____
Address	Salary
_____	_____
Supervisor/Contact	Telephone Number

I have received and signed the “Notice Regarding Background Investigation” along with the “Summary of Rights Under The Fair Credit Reporting Act.” I authorize Hire Image LLC to conduct a background investigation and to obtain information about me from appropriate credit reporting agencies, other consumer reporting agencies, criminal record repositories, other Federal, State or Local governmental agencies, workers compensation files, public records, former employers (current employers if indicated), schools, listed or developed references, or others who may be able to provide information as to my background, character and general reputation. I hereby affirm that my answers to all questions on my application, this data sheet and all employment and residential history are true and correct and that I have not knowingly withheld any facts or circumstances that would, if disclosed, affect my application or continued employment.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Date

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