

APPLICANT RELEASE AND AUTHORIZATION FORM

I HEREBY AUTHORIZE Kids C.A.N. OR AUTHORIZED REPRESENTATIVES OF THE COMPANY BEARING THIS RELEASE TO OBTAIN AND RELEASE ANY INFORMATION PERTAINING TO MY BACKGROUND, INCLUDING ANY OF THE SERVICES NOTED BELOW, FOR EMPLOYMENT OR VOLUNTEER 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 INVESTIGATION OF MY BACKGROUND FOR SAID PURPOSES.

APPLICANT SIGNATURE	
APPLICANT NAME (PRINTED):	
DATE	

APPLICANT INFORMATION		
FIRST NAME	MIDDLE NAME	LAST NAME
ALIAS INFORMATION		
FIRST NAME	MIDDLE NAME	LAST NAME
OTHER INFORMATION		
DATE OF BIRTH		
SOCIAL SECURITY NUMBER		
DRIVERS LICENSE NUMBER		
STATE OF ISSUE		
CURRENT ADDRESS		
STREET/CITY/STATE/ZIP CODE		
DATE FROM:	DATE TO:	

PREVIOUS ADDRESS			
STREET/CITY/STATE/ZIP CODE			
DATE FROM:		DATE TO:	
CURRENT EMPLOYER			
STREET/CITY/STATE/ZIP CODE			
POSITION	SUPERVISOR	TELEPHONE NO.	DATES TO/FROM
PREVIOUS EMPLOYER			
STREET/CITY/STATE/ZIP CODE			
POSITION	SUPERVISOR	TELEPHONE NO.	DATES TO/FROM
EDUCATION/NAME			
STREET/CITY/STATE/ZIP CODE			
MAJOR	MINOR	DEGREE TYPE	DEGREE DATE
DATE FROM:		DATE TO:	