

Sample Consent Form

I do hereby consent and authorize:

(REQUESTER)

to examine, inspect, interview, or obtain copies of any and all records or reports concerning my consumer credit history, criminal history, driving history, worker's compensation claims history (in compliance with ADA), scholastic records, military records, present or previous employment, and all medical records.

I understand that these reports may include information as to my character, work habits, performance, experience, with reasons for termination of past employment from previous employers.

Subject's Signature _____ Print Name _____

Witness Signature _____ Print Name _____

Notary (If required)

Date _____