**RC Health Services**

**Background Investigation Authorization Form**

Thank you for your interest in employment at AEMSTAR Health & Safety. As part of the employment process, certain information may be requested as it relates to the employment you seek. Your signature on this document indicates that you have read and understand the conditions set forth by AEMSTAR Health & Safety.

I understand that AEMSTAR Health & Safety may perform a pre-employment background investigation to determine my suitability for the employment I seek; I hereby authorize the Company to secure the information necessary to make such a decision. I further understand that while an offer of employment might precede any such investigation, actual employment is contingent upon a determination of my suitability for the employment I seek.

I certify that if I am offered a position I will provide the Company acceptable documents on my first day of employment that show that I am legally permitted to work in the United States. I also certify that I have never been convicted of a felony in the state of Texas or any other state.

By signing this document, I authorize the Company to conduct a background investigation. I also certify that the information provided in my resume and/or letter of employment is accurate, and, if offered employment, I understand that any information falsely provided will be sufficient grounds for the immediate termination of my employment.

I hereby authorize the release of the information related to this investigation, and further release from liability any and all individuals and organizations who provide information to AEMSTAR Health & Safety concerning my professional competence, ethics, character, criminal record (if any), and qualifications and authorize my prior employers to release any such requested information about my employment.

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Signature Date

**Please note: You will not be considered for employment if you do not provide the authorization for the Company to conduct the background investigation identified above.** Date of birth and Social Security number will be used only to complete the background investigation and will not become part of the selection process.

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Name Name (maiden/alias)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth Social Security No.

 Last three states of residence:

1) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_to\_\_\_\_\_\_\_\_\_\_

 Address City State, Zip Dates of Residence

2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_to\_\_\_\_\_\_\_\_\_\_

 Address City State, Zip Dates of Residence

3) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_to\_\_\_\_\_\_\_\_\_\_

 Address City State, Zip Dates of Residence

 (Federal Law prohibits discrimination against persons age 40 and over. Date of birth is used for verification purposes only and is not released to the hiring official or search committee prior to an individual’s acceptance of employment)