



MATAGRANO, INC.

DISCLOSURE & RELEASE AUTHORIZATION



To Whom It May Concern:

(LAST NAME)

(FIRST)

(MIDDLE NAME **NOT** INITIAL)

I, _____ hereby consent and authorize The Company or any of its Agents to conduct a background investigation including, but not limited to, obtaining a **consumer credit report** and information as to my credit worthiness, credit standing, character, general reputation, credit capacity, personal characteristics and mode of living. This report may include personal interviews or research with sources such as neighbors, friends, associates, past and present employers, educational institutions, financial institutions, police departments, court records, or other persons having knowledge about me. In connection with an application for employment, please furnish the bearer with any and all information in their possession about me. Further, I hereby release from liability and hold harmless all persons, agencies, institutions, and corporations supplying this information to the Company, or any of its agents, employees, or contractors. **A photocopy of this authorization can be accepted with the same authority as the original.**

By placing a check here , I am requesting that I be furnished with a copy of any consumer report that is obtained or used in connection with my application for employment.

1. Signature: _____ Male Female Date: _____

2. Other Names Used/: _____

eg Maiden Name. (LAST NAME) (FIRST) (MIDDLE NAME **NOT** INITIAL)

(If none, mark "N/A")

(LAST NAME) (FIRST) ((MIDDLE NAME **NOT** INITIAL)

3. Social Security Number: _____ - _____ - _____

4. Date of Birth: _____
Month Day Year

(Used for Identification purposes only)

5. Tel. # _____ / _____ - _____

6. Driver's License# _____ STATE _____

7. Current Address: _____

STREET ADDRESS

CITY

STATE ZIP

8. Detail **CITY & STATE** of **ALL EMPLOYMENTS** and **RESIDENCES** for the **LAST SEVEN (7) YEARS**.

EMPLOYMENTS

RESIDENCES

City: _____ State _____
Dates: _____

City: _____ State _____
Dates: _____

City: _____ State _____
Dates: _____

City: _____ State _____
Dates: _____

City: _____ State _____
Dates: _____

City: _____ State _____
Dates: _____

City: _____ State _____
Dates: _____

City: _____ State _____
Dates: _____

PLEASE DO NOT WRITE IN THIS BOX