

# SAFE-T-WORKS, INC.

**Drug & Alcohol Testing and Pre-Employment Services**  
1029 Sunset Avenue, Asheboro, NC 27203  
Phone: 336-736-8038 Fax: 336-736-8042

## Background Investigation

*Please perform a background investigation on the following (please PRINT all information):*

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_____ Last Name	_____ First Name	_____ Middle Name	_____ Maiden Name
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Current Street Address \_\_\_\_\_

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_____ City	_____ State	_____ ZIP
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Prior Street Address \_\_\_\_\_

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_____ City	_____ State	_____ ZIP
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Gender: M F

_____ FULL Date of Birth	_____ Social Security Number
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Race: \_\_\_\_\_

### **Signature of Authorization**

FCRA: 1) Signing this authorizes a background investigation. 2) You may not be hired or your employment continued based on our report. 3) You will be told if that is the intent. 4) You can view the report and dispute items you feel are erroneous with us or the source.

I hereby authorize the release to Safe-T-Works, Inc., any information held by any parties regarding my prior employment, criminal, credit, driving, workers comp. and educational history as well as information regarding my general character and reputation. I release any providers of such information from any liability for providing same. I understand the information may be reviewed initially and periodically by Safe-T-Works and reported to my prospective/actual employer. I agree falsification may make me ineligible for employment or subject to immediate dismissal, if hired. I further acknowledge that Safe-T-Works is relying on third party information and I therefore release Safe-T-Works, my prospective employer, and their respective owners, officers, agents and employees from any and all liability arising out of errors or omissions. If not hired, I understand I do have certain rights under FCRA laws.

**Please check the appropriate box below:**

- |  |  |
|--|--|
| <input type="checkbox"/> Multi-State with Identitrac (National)                          | <input type="checkbox"/> State _____               |
| <input type="checkbox"/> Identitrac (Social Security & Address Verification only)        | <input type="checkbox"/> National Sex Offender     |
| <input type="checkbox"/> Other _____   | <input type="checkbox"/> Federal Courthouse Search |
| <input type="checkbox"/> Driver's License Check _____<br>Driver's License Number & State | <input type="checkbox"/> Credit History            |

Requested by:

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_____ Phone Number	_____ Today's Date
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**Please fax to Safe-T-Works, Inc at 336-736-8042**