

## EMPLOYMENT BACKGROUND AUTHORIZATION FORM

I, \_\_\_\_\_, hereby voluntarily grant Professional  
(Print Last, First, and Middle Name)

Protection Incorporated the legal right to conduct any and all required Criminal Records Checks at the local and national achieve levels pertaining to my personal criminal history. I certify that the following information is provided voluntarily and the submission of false information either to obtain and use criminal history information for any purpose other than employment could result in criminal penalties including a fine or imprisonment.

1. Name: \_\_\_\_\_  
(LAST FIRST MIDDLE)

2. Date of Birth: \_\_\_\_\_  
(MONTH, DAY, YEAR)

3. Place of Birth: \_\_\_\_\_  
(CITY STATE COUNTY)

4. Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

5. Operator's (Drivers) License Number / State: \_\_\_\_\_  
\_\_\_\_\_.

6. Have you ever pled guilty to and/or been convicted of any crime **Felony or Misdemeanor**? Yes No

7. Have you ever been paroled or been on probation? Yes No

I hereby certify that all answers and statements in this form are true and accurate to the best of my knowledge.

Signature of Applicant: \_\_\_\_\_

Date Signed: \_\_\_\_\_  
(MONTH, DAY, YEAR)