

STATE OF GEORGIA
PRE-EMPLOYMENT INQUIRY RELEASE

I, _____ am giving Database Systems permission to perform a consumer report (to include, but not limited to, credit, MVR, or criminal background check) on my past history, now, and on future dates or and investigation consumer report may be made and forwarded to State of Georgia. I understand that by signing this release does not in any way constitute employment with State of Georgia. All questions must be filled out completely and accurately. Incomplete or inaccurate information may lead to rejection of your application for a background check. Information found to be false can also lead to rejection of your application.

Applicant Name: _____
(First) (Middle) (Last) (Maiden)

Address: _____

City: _____ State: _____ Zip: _____

Please list your current county of residence. If you have not lived in your current county for the past seven years, also, list the other county (s) you have lived in during the last seven years along with your current one.

1) Current County: _____ State: _____ 2) Previous County: _____ State: _____

Race: _____ Sex: _____ Drivers License #: _____ State: _____

Social Security Number: _____ Date of Birth: _____

Applicant's Signature: _____

PREVIOUS EMPLOYMENT Start with Present to Last Position

Full Company Name	Phone/Address	Dates of Employment

EDUCATION

Name of School	Degree/Year

PROFESSIONAL LICENSE INFORMATION

Name On License	State Issued	License Number/Profession

----- **For HR Use Only** -----

- Employment Verification (Per Applicant/Per Employer)
- Education Verification (Per Applicant/Per Institution)
- Federal District Criminal Record Search (Per Applicant/Per Search/Per Name)
- National Criminal Record Search (Per Applicant/Per Search/Per Name)
- State Criminal Record Search (Per Applicant/Per Search/Per Name)
- County Criminal Record Search (Per Applicant/Per Search/Per Name)
- Motor Vehicle Record (MVR) Search (Per DL#/Per State)
- Citizenship Right To Work (I-9) (Per Applicant/Per Search)
- Sexual Predator Search (Nationwide) (Per Applicant/Per Search)
- Credit Report (Per Applicant/Per Bureau)
- Professional Licensure/Certification (Per Applicant/Per License or Certification)
- Social Security Trace/Verification (Per Applicant/Per Search)
- Address History (Per Applicant/Per Search)
- Personal/Professional References (Per Applicant/Per Reference)

APO/UPO or Requestor's Name _____ Date: _____

Department/Agency _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Site Fax# or Email _____

FAX OR EMAIL COMPLETED FORM TO DATABASE SYSTEMS INTERNATIONAL www.dsiinc.net
Fax: (1-866) 760-1878 or sales@dsiinc.net Phone: 1-866-773-3675 or 770-760-1866