

I hereby authorize, without reservation, Creative Services, Inc. of 64 Pratt Street, Mansfield, MA 02048-1927, (800) 536-0093 or (508) 339-5451 and its agents to conduct a full investigation into my background and activities at any point after this authorization and, if hired, throughout my employment. Therefore, I hereby authorize the release of any and all information pertaining to me, documentary or otherwise, as requested by any appropriate employee, agent or representative of Creative Services, Inc. I understand that during this background investigation process and in accordance with the Fair Credit Reporting Act, a "consumer report," "consumer credit report," and/or "investigative consumer report" (consumer report) may be obtained concerning my character, general reputation, personal characteristics, and mode of living. The nature and scope of my investigation departments, selective service boards, employers, educational institutions, banks, credit bureaus, financial and other institutions, law enforcement and local, state (including the Minnesota Bureau of Criminal Apprehension), and federal government agencies without exception, both foreign and domestic to furnish any and all background information (including, but not limited to, driving and/or motor vehicle records) requested by Creative Services, Inc. I understand that this information may be transmitted electronically and authorize such transmissions. I agree that a photocopy of this release shall be accepted with the same authority as the original.

CSI's Privacy Policy can be found at <u>http://www.creativeservices.com/html/privacy\_policy.html</u> or obtained by request to the above address.

California, Minnesota, and Oklahoma applicants or employees only: Please check this box if you would like a copy of the consumer report if one is prepared on you?													
If currently employed, may we contact your current employer?													
(Last Name)													
(First Name)	(Middle Name)												
					•		,						
(Other Names) In the space above, list all other NAMES (including maiden or married names) utilized during the													
previous 7 years and/or used when obtaining any degrees or certifications.													
Cell Phone: () Home Phone: : ()													
Email address:						1		<u> </u>			 	<u> </u>	1
Current Address:													
							Zip Code:	•				•	
City & State:							-	<u> </u>					
							Date of Birth: * MM/DD/YYYY						
Social Security Number:*							╶┼────┼┼┍┛┼└└─						
Driver's License Number:*							State of Iss	sue:					
Signature:	<u>    1    1    1</u>					I			Date	:			

• Social security numbers, dates of birth, and drivers' license numbers are requested to ensure accurate retrieval of records. They will not be considered by the employer in making employment decisions. This form will be filed separately from your employment application.

<b>Release Authorization</b> I hereby authorize the release of any and all information pertaining to me, documentary or otherwise, as requested								
by any appropriate employee, agent or representative of Creative Services, Inc. PLEASE INCLUDE THE FULL ADDRESSES, <i>INCLUDING ZIP CODE</i> , OF ALL PLACES OF RESIDENCE IN THE PAST SEVEN (7) YEARS. INCLUDE THE NAME AND TELEPHONE NUMBER OF TWO PEOPLE WHO CAN VERIFY THIS RESIDENCE.								
		IEONE YOU CURRENTLY RESIDE WITH:						
(#/Street)	(City)	(State) (Zip Code)						
Residential Dates	Reference Name	Telephone Number (Cell Phone Preferred)						
Residential Dates	Reference Name	Telephone Number (Cell Phone Preferred)						
(#/Street)	(City)	(State) (Zip Code)						
Residential Dates	Reference Name	Telephone Number (Cell Phone Preferred)						
Residential Dates	Reference Name	Telephone Number (Cell Phone Preferred)						
(#/Street)	(City)	(State) (Zip Code)						
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(#/Street)	(City)	(State) (Zip Code)						
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(#/Street)	(City)	(State) (Zip Code)						
Residential Dates	Reference Name	Telephone Number (Cell Phone Preferred)						
Residential Dates	Reference Name	Telephone Number (Cell Phone Preferred)						
(#/Street)	(City)	(State) (Zip Code)						
Residential Dates	Reference Name	Telephone Number (Cell Phone Preferred)						
Residential Dates	Reference Name	Telephone Number (Cell Phone Preferred)						
Signature:		Date:						



## **Release Authorization**

I hereby authorize the release of any and all information pertaining to me, documentary or otherwise, as requested by any appropriate employee, agent or representative of Creative Services, Inc.

PLEASE LIST THE NAMES AND FULL ADDRESSES, <i>INCLUDING ZIP CODE</i> , OF ALL THE PLACES WHERE YOU HAVE WORKED IN THE PAST SEVEN (7) YEARS:								
Employer:	Telephone:							
Address:C	ity:	State:	_ Zip Code:					
Dates of Employment: // to// Position:		_ Supervisor:						
Salary: Reason For Leaving:	Primary Duties:							
Employer:	Telephone:	·						
Address:C	ity:	State:	Zip Code:					
Dates of Employment: / / to _ / / Position:		_ Supervisor:						
Salary: Reason For Leaving:	Primary Duties:							
Employer:	Telephone:	·						
Address:C	ity:	State:	Zip Code:					
Dates of Employment: // to// Position:		_ Supervisor:						
Salary: Reason For Leaving:	Primary Duties:							
Employer:	Telephone:							
Address:C	ity:	State:	_ Zip Code:					
Dates of Employment: // to// Position:		_ Supervisor:						
Salary: Reason For Leaving:	Primary Duties:							
Employer:								
Address:C	ity:	State:	_ Zip Code:					
Dates of Employment: // to// Position:		_ Supervisor:						
Salary: Reason For Leaving:	Primary Duties:							
Signature:		Date	e:					