

**Criminal History Report Procurement Authorization**

*For Company Use Only*

**Company: *Murphy and Associates***

Date: \_\_\_\_\_

Co. Representative: Erik Murphy

Company Representative Contact Number: (425) 250-1300

Applicant Name: \_\_\_\_\_  
(Please print clearly) (Last) (First) (Middle Name)

Applicant Maiden Name/Alias (list all): \_\_\_\_\_

Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Drivers License # \_\_\_\_\_ State \_\_\_\_\_

Date of Birth: \_\_\_\_\_ -- \_\_\_\_\_ -- \_\_\_\_\_ Place of Birth \_\_\_\_\_  
(Month) (Day) (Year)

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_  
Height Weight Hair color Eye color Race Sex(M/F)

Have you been convicted or accused of a felony? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, please give:  
*Please note: Admittance of felony convictions does not automatically disqualify employment.*

\_\_\_\_\_  
**DATE COUNTY STATE CRIME**

Current Phone/Pager Current Street Address City State County  
(\_\_\_\_) \_\_\_\_\_

List below addresses at which you have lived in the past seven years, with dates.

From To Previous Street Address City State County  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The undersigned, in connection with an application for employment, hereby authorizes the procurement of an investigative report. This authorizes any law enforcement or judicial agency, corporation, company or others to provide relevant information they may have on the applicant to Background Checks, Inc. This further releases all parties providing information from any and all liabilities or responsibility for doing so. The undersigned hereby acknowledges that they read or have had read to them this authorization and they understand it. A copy of this authorization has the same authority as the original.

\_\_\_\_\_  
Signature Date