

## Client Name (Sample)

### Applicant Release Form

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

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ (DOB is requested in order to obtain accurate retrieval of records.)

Driver's License # \_\_\_\_\_ State \_\_\_\_\_

Applicant Email Address: \_\_\_\_\_

### Applicant Release Agreement

In connection with any application made by me, I understand that you may be requesting information from various Federal, State, and other agencies which maintain records concerning past activities relating to my credit, criminal, driving, civil, and other records and experiences, including claims involving me in the files of insurance companies, if any. These reports may also include information on education, employment experience, work habits, mode of living, general reputation, character, along with reasons for termination of employment from previous employers, if any, as well as previous salary(ies). I agree, that should I become an employee, my employer has the right to obtain any and all reports, at any time, during my employment.

**Without reservation**, I authorize any party or agency contacted to furnish the above-mentioned information and release all parties involved from any liability and/or responsibility for doing so. I hereby consent to any potential employer obtaining such information from Argus Search, Inc. and/or any of their agents. This authorization and consent shall be submitted in an original, fax, email or copy form.

I, my heirs, personal representatives, successors and assigns, hereby release and hold harmless Argus-Search Inc. and employer, and any of their employees, agents, directors, or commissioners from any and all liability, claims, claims bills or relief acts or legislative petitions, damages, both compensatory and punitive, costs and attorney's fees, whether arising at law or in equity, which may at any time arise out of the retrieval, distribution, storage or use of my criminal history for determination of my fitness as determined by the personnel or human resource staff, to be an employee of, or maintain my employment with.

I have the right to make a request to Argus Search, Inc., upon proper identification and payment of any authorized fees, the information in its files on me at the time of my request. Argus Search, Inc. does hereby agree to provide the requested information in accordance with the Fair Credit Reporting Act and submit a written report via U.S. mail email, or fax.

By signing below, I acknowledge that I have read and understand this Authorization and Release form.

Signature: X \_\_\_\_\_

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