



I, \_\_\_\_\_, understand and agree that, as a condition of employment, and in order to assess my qualifications for the position of \_\_\_\_\_, a full investigation of my background is necessary, including verification of all information submitted on my application for employment.

**I have read, understand and agree to the following:**

I hereby authorize the Town of Lisbon or a third party acting on its behalf, to conduct a thorough inquiry into all areas deemed necessary to assess my qualifications for employment. I understand and agree that the Town of Lisbon may contact or contract with private information centers, consumer reporting agencies, government agencies, mutual associations, educational institutions, former employers and other third parties to assess my qualifications and verify information that I provide is accurate in every way. This may include, but is not limited to: verification of my employment, educational, and personal history; verification of information provided on my application or resume; contact with current and former employers, clients, business associates, professional organizations or other institutions regarding work performance and character; inquiry into my credit history, driving record, and criminal history as well as all public record information relating to my application for employment.

I hereby specifically release from liability and authorize employers, local, state, and federal administrators, credit bureaus, institutions, mutual associations, consumer reporting agencies or any persons to freely and completely respond to any inquiry made by or on behalf of the Town of Lisbon.

*A copy of this document shall be, for all intents and purposes, as valid as the original*

Applicant Legal Name: Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Other Names Used: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Drivers License Number: \_\_\_\_\_ Issuing State: \_\_\_\_\_

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

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I hereby authorize the background investigation discussed herein and I affirm that all answers given to the Town of Lisbon are true and complete. I understand that my employment may be ended at any time if it is discovered that I withheld or falsified any information during the hiring process.

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