



# Background Check/Drug Screening Release

I give Ameritraining, Inc. permission to hire services providing background searches and drug screening in order to determine employment eligibility. I do hereby release Ameritraining, Inc., Sterling Infosystems, Inc., LabCorp, Quest Diagnostics, and all individuals connected therewith from all liability. Ameritraining, Inc. does hereby certify that any information requested is for the purpose of evaluating a consumer for employment or as an independent contractor. Furthermore Ameritraining, Inc. certifies that all information will remain confidential and will only be shared with a professional background search company and potential employer.

**COMPANY BEING ASSIGNED TO:** \_\_\_\_\_

**COMPANY LOCATION CITY, STATE:** \_\_\_\_\_  
(Please list WAH for Work-at-Home)

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY/STATE/ZIP CODE:** \_\_\_\_\_

**HOME PHONE NUMBER:** \_\_\_\_\_ **MOBILE PHONE NUMBER:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_\_ **GENDER:**  Male  Female

**SOCIAL SECURITY NUMBER:** \_\_\_\_\_

**DEGREE EARNED:** \_\_\_\_\_

**EDUCATION:** (Show information for highest level achieved)

Institution, City, State

**CERTIFICATIONS:** \_\_\_\_\_

**PREVIOUS EMPLOYER (List previous 7 years of employment):** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PREVIOUS JOB TITLE:** \_\_\_\_\_

**HOW LONG?:** \_\_\_\_\_

**DRIVER'S LICENSE NUMBER:** \_\_\_\_\_

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

State: \_\_\_\_\_

**Have you ever been convicted of a felony?:**  Yes  No Record

**In the past 10 years, have you been convicted of a misdemeanor?:**  Yes  No Record

**If you responded "Yes" to either question above, please provide details about your conviction, including where (county/state), when (month/year), offense and offense type (felony, misdemeanor):**

\_\_\_\_\_  
\_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_, 20\_\_\_\_

**PLEASE RETURN COMPLETED FORM WITH SIGNATURE TO SHAWNE HOISINGTON VIA FAX OR E-MAIL:**

Fax (214) 281-8623 ~ [hoisington@ameritraining.com](mailto:hoisington@ameritraining.com)

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