# Authorization for Background Check

I hereby authorize Stephens Little Inc. to investigate my background and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying. I understand that the Company will utilize an outside firm or firms to assist in checking such information, and I specifically authorize such an investigation by information services and outside entities of the Company's choice. I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application for employment will not be processed further.

***PLEASE PRINT LEGIBLY – ALL INFORMATION IS REQUIRED.***

| Last Name: | First Name: | Middle Name: |
|---|---|---|

| Address: | City: | State: | Zip Code: |
|---|---|---|---|

| Home Phone: | Cell Phone: | Date of Birth: (mm/dd/yyyy) |
|---|---|---|

| Driver's License State And Number: | Social Security Number: |
|---|---|

| U.S.Citizen: __Yes __No | Authorized to Work in the U.S.: __Yes __No | Visa Type: |
|---|---|---|

List below any names used previously:

| Last Name: | First Name: | Middle Name: |
|---|---|---|
| | | |
| | | |

List below the full city/county/states where you have lived and/or worked in the last 7 years:

| City: | County: | State: |
|---|---|---|
| | | |
| | | |

| | | |
|---|---|---|
| Have you ever been convicted of a felony or misdemeanor? | Yes: | No: |
| Have you ever accepted deferred adjudication or pled no contest? | Yes: | No: |

I certify that the information provided is complete and accurate to the best of my knowledge. I further authorize Stephens Little to share a copy of my completed background check upon the specific request of their client.

_____ _____

Signature Date

For Office Use Only:

| Driver's License: | Criminal: | Sex Offenders: |
|---|---|---|

| Verified by: | Date: | Requested by: | Date: |
|---|---|---|---|