



PRE-EMPLOYMENT APPLICATION AUTHORIZATION RELEASE

In connection with my application for employment, I understand and agree that background inquiries may be requested by RSIG Security, Inc. or on behalf of RSIG Security, Inc. that will seek information as to my character, work habits, including oral assessments of my job performance, experiences and abilities along with reasons for termination of past employment. Furthermore, I understand and agree that RSIG, Security, Inc. may request information from various federal, state, and other agencies, including public and private sources which maintain records concerning my past activities relating to my driving record, credit history, criminal record, civil matters, previous employment, educational background, and other past experiences.

I acknowledge that a telephonic facsimile or copy of this release shall be as valid as the original. This release is valid for all federal state county and local agencies and authorities.

The following is my complete and legal name, and all information is true and correct to the best of my knowledge.

Last Name:	First Name:	Middle Name:	Suffix
Divers License Number: State Issued by:	Maiden or Previous Last Name:	Previous First Name:	Are you at least 18 years old:
Current Street Address:	City: State: Zip:	Date Moved to current address:	Do you? Rent: Own:
Previous Street Address:	City: State: Zip:	Date From: Date To:	Did you? Rent: Own:
Previous Street Address:	City: State: Zip:	Date From: Date To:	Did you? Rent: Own:
Current Employer Name:	Street Address:	City: State: Zip:	Date From: Date To:
Previous Employer Name:	Street Address:	City: State: Zip:	Date From: Date To:
<i>The following questions are voluntary and of ID purposes only.</i>	<i>Date of Birth: (dd/mm/yyyy)</i>	<i>Social Security Number:</i>	<i>Female:</i> <i>Male:</i>

Print this form, sign and date the form and fax the completed form to: (248) 357-9068

Phone Number:

E-mail:

Applicant Signature:

Date