

APPLICANT AUTHORIZATION AND CONSENT  
FOR RELEASE OF INFORMATION

Midwest Nannies Florida requires that all applicants consent to and authorize a pre-employment verification of the background information submitted on their application or resume.

I, the undersigned applicant, do hereby certify that the information provided by me for the purpose of employment is true and complete to the best of my knowledge. I understand that if I am employed, any false statement will be considered as cause for possible dismissal.

This release and authorization acknowledges that Midwest Nannies Florida may now, or at any time while I am employed through this company, administer a personality profile: conduct a verification of my education, previous employment/work history, credit history, motor vehicle records, worker's compensation history from the Department of Labor and/or the Worker's Compensation Commission, contact personal references, require that I provide a urine specimen to be tested for the presence of drugs or alcohol, and to receive any criminal history record information pertaining to me which may be in the files of any Federal, State, or Local criminal justice agency in Florida or any other State and/or other information as deemed necessary to fulfill any job requirements. Results of this verification process will be used to determine employment eligibility under Midwest Nannies Florida employment policies.

I authorize Midwest Nannies Florida and any of its agents/designate personnel, to disclose orally and in writing the results of this verification process.

I have read and understand this release and consent, and I authorize the background verification. I authorize persons, schools, current and former employers, and other organizations and Agencies to provide Midwest Nannies Florida with all information that may be requested, and I hereby release all of the persons and Agencies providing such information from any and all claims and damages connected with their release of any requested information. I agree that any copy of this document is as valid as the original.

I do hereby agree to forever release and discharge Midwest Nannies Florida any person, school, employer, organization, and Agency to the full extent permitted by law from any claims, damages, losses, liabilities, costs and expenses, or any other charge or complaint filed with any agency arising from the retrieving and reporting of this information. According to the Federal Fair Credit Act, I am entitled to know if employment was denied based upon information obtained by my prospective employer and to receive upon written request, a disclosure of the nature and scope of the investigative report.

\_\_\_\_\_  
Present Area Code and Phone Number

\_\_\_\_\_  
Print Full Name

\_\_\_\_\_  
Maiden Name

\_\_\_\_\_  
Current Address: How Long? \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Street

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

\_\_\_\_\_  
City State Zipcode

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Previous Address: How Long? \_\_\_\_\_

\_\_\_\_\_  
Drivers License Number

\_\_\_\_\_  
Street

\_\_\_\_\_  
Name Exactly As It Appears on Drivers License

\_\_\_\_\_  
City State Zipcode