

DISCLOSURE AND AUTHORIZATION

IN CONNECTION WITH MY APPLICATION FOR EMPLOYMENT, I UNDERSTAND THAT A BACKGROUND INVESTIGATION WILL BE PERFORMED (INCLUDING, BUT NOT LIMITED TO CRIMINAL MOTOR VEHICLE RECORDS AND CREDIT HISTORY)

I HEREBY AUTHORIZE AND RELEASE FROM ALL LIABILITY, WITHOUT RESERVATION, MORITZ A ASSOCIATES AND/OR TTS AGENTS INVOLVED IN GATHERING OR FURNISHING ALL INFORMATION REGARDING MY BACKGROUND.

I FURTHER ACKNOWLEDGE THAT A TELEPHONE FACSIMILE (FAX) OR PHOTOGRAPH COPY OF THIS DOCUMENT WILL BE AS VALID AS THE ORIGINAL.

PRINTED NAME

SOCIAL SECURITY NUMBER

DATE OF BIRTH

APPLICANT'S SIGNATURE

APPLICANT'S ADDRESS

CITY **STATE** **ZIP**

TODAY'S DATE

DRIVER'S LICENSE/ISSUED BY STATE