

**Background Release Form**  
**Salus Solutions LLC**  
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A consumer report may include information about your character, general reputation, personal characteristics, or mode of living. Upon written request made within a reasonable period of time to the Consumer Reporting Agency a complete and accurate disclosure of additional information as to the nature and scope of the Consumer Report will be provided to you. You are entitled to ask your prospective employer for a copy of your Consumer Rights under the Fair Credit Reporting Act (Revised 10/97).

Release of Information Form

I understand that a Consumer Report or an Investigative Consumer Report as described above may be obtained. All corporations, companies, credit agencies, financial institutions, educational institutions, persons, law enforcement agencies, courts, former employers and military services are authorized to release all written and verbal information about me. I hereby release all individuals, companies, corporations, and agencies, public or private, connect therewith from any and all liability associated with the dissemination of such information pertaining to me. I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification, to the extent that such investigation includes information bearing on my character, general reputation, personal characteristics or mode of living.

APPLICANT'S PRINTED NAME \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PREVIOUS ADDRESSES: (City, State & Zip Code for previous seven years)

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

APPLICANT'S SIGNATURE \_\_\_\_\_

DATE SIGNED \_\_\_\_\_