



EXECUTIVE SECURITY SPECIALISTS, INC.

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FLOOR COVERING ASSOCIATES AUTHORIZATION FORM TO CONDUCT A BACKGROUND INVESTIGATION

Please clearly print or type the following information

Name: _____
Last Name First Name Middle Name

Address: _____ Apt: _____

City: _____ State: _____ Zip: _____

Social Security Number: _____ - _____ - _____ Telephone Number: _____ - _____ - _____

Driver's License Number: _____ State Issued in: _____

I _____ request and authorize Floor Covering Associates, Inc., and its agents (Executive Security Specialists, Inc.) to conduct a thorough investigation into the accuracy of any and all statements and information contained on this authorization about me including, but not limited to, Credit Bureau reports, Criminal History information, Driver's License checks, Military information, Employment information, Birth records, Drug Screening, and any other information that may be requested. I also release any and all parties related to this investigation from any civil actions or liability and agree to hold harmless any and all parties involved, and specifically Executive Security Specialist, Inc., in regards to providing information they may have about me, business, personal or otherwise. I also understand and agree that this form shall be legally binding whether presented as an original form, as a copy thereof, or if submitted as a fax transmittal.

Signature of Applicant

Date Signed

Witness to Signature

Date Signed

Applicant Tracking Log

Date: _____

Phone Number: _____

How were you referred to Floor Covering Associates, Inc.

_____ Herald News

_____ Sun Publications

_____ Chicago Tribune

_____ Elgin Courier

_____ Beacon News

_____ Internet

_____ Referred by: _____

_____ Penny Saver

_____ Job Board at: _____

_____ Other: _____