

## **APPLICANT/EMPLOYEE INFORMATION SHEET**

Job Applicants/Employees: Please provide the following information about yourself. It will be used to facilitate the background check that you have authorized.

First Name	Midd	Middle Name	
		1	1
Last Name	Date	of Birth (MI	MDDYYYY)
Other Names Known By		Male	Female
	<u>/</u>	/	
Social Security Number	Primary Telephone Nu	mber	
Driver's License Number	License State		
Email Address	_		
Current Address			#yrs at address
City	State	Zip Cod	de
If you have lived at another address in the last seven years, p (Note: If you do not have enough space below, please prov paper.)			
Past Address			#yrs at address
City	State	Zip Cod	de
Past Address			#yrs at address
City	 State	Zip Cod	de
Signature		Today's	s Dat