

# Consent for Background Screening

Date: \_\_\_\_\_

To Whom It May Concern,

I, **[Your Full Name]**, hereby give my consent for **[Company/Organization Name]** to conduct a background screening as part of the employment process. I understand that this screening may include, but is not limited to, checking my criminal history, education verification, employment history, and any other pertinent information.

I acknowledge that I have read and understood the nature of this screening process and the purpose for which the information will be used. I also understand that I have the right to request additional information regarding the nature and scope of the investigation.

By signing this consent form, I release **[Company/Organization Name]** and any individuals or entities who provide information as part of the background check from any liability for obtaining and using this information.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

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

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Thank you for your attention to this matter.

Sincerely,

**[Your Name]**