

## Background Information Release

In connection with my application for employment (including contract for services), I understand that consumer or investigative consumer reports which may contain public record information, may be requested or made on me including consumer credit, criminal records, driving record, education, prior employer verification, workers compensation claims and others. These reports will include experience along with reasons for termination for past employment. Further, I understand that you will be requesting information from various Federal, State and Local agencies regarding my past activities. I also understand that the information below regarding sex, race and date of birth is requested for the sole purpose of gathering the above information correctly, and will not be used to discriminate against me in violation of any law.

I hereby authorize without reservation, any party or agency to furnish the above-mentioned information.

**FOR IDENTIFICATION PURPOSES: PLEASE PRINT ALL INFORMATION CLEARLY**

(Name)

Last: \_\_\_\_\_ First: \_\_\_\_\_

Middle: \_\_\_\_\_ Other Names Maiden, Aliases, etc. \_\_\_\_\_

Date of Birth: Month: \_\_\_\_ Day : \_\_\_\_ Year: \_\_\_\_\_ Race: \_\_\_\_ Gender: \_\_\_\_ Phone: \_\_\_\_\_

Social Security # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Drivers License # \_\_\_\_\_ State: \_\_\_\_\_

**LIST ALL ADDRESSES FOR THE PAST SEVEN (7) YEARS STARTING WITH THE MOST CURRENT:**

	Street	City	State	Zip	Dates (MM/YEAR)
1.	_____	_____	_____	_____	From: ____ To: ____
2.	_____	_____	_____	_____	From: ____ To: ____
3.	_____	_____	_____	_____	From: ____ To: ____
4.	_____	_____	_____	_____	From: ____ To: ____
5.	_____	_____	_____	_____	From: ____ To: ____

**Haywood County Schools  
Coaching Experience Verification**

*I verify that the above information is accurate:*

Coach's Name			School	
Date(s)	Sport(s)	School(s) Organization(s)	Individual Verifying Experience	Verifying Individual's Contact Information

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Total Years Experience \_\_\_\_\_

- |  |  |                                     |
|--|--|-------------------------------------|
| <input type="checkbox"/> Employee                      | <input type="checkbox"/> Volunteer Coach | <input type="checkbox"/> Substitute |
| <input type="checkbox"/> Non-Employee Contracted Coach | <input type="checkbox"/> Volunteer       | <input type="checkbox"/> Chaperone  |
| <input type="checkbox"/> Other: _____                  |  |                                     |

