

# Criminalscreening.com

## Application for employment Credit/Criminal/MVR authorization

536 N. Westmoreland Dr. # 4  
Orlando, FL 32805

Ph. 407-246-1914  
Fx. 407-246-1377  
Email: jra@crimnalscreening.com

Company/Apartment \_\_\_\_\_ Fax # \_\_\_\_\_

\*Reason for request (**Required**) (ie., Employment, Tenant, Etc.) \_\_\_\_\_

Applicant's name \_\_\_\_\_ Race \_\_\_\_\_ Sex \_\_\_\_\_ DOB \_\_\_\_\_

DL# \_\_\_\_\_ State issued \_\_\_\_\_

Social Security number \_\_\_\_\_ Ph# \_\_\_\_\_

Current address \_\_\_\_\_

City, State, Zip (**Required**) \_\_\_\_\_

Current employer \_\_\_\_\_ Phone number \_\_\_\_\_

Previous employer \_\_\_\_\_ Phone number \_\_\_\_\_

Previous address (If less than 3 years at above, **required**) \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Have you ever been charged with a crime? (IF yes explain) \_\_\_\_\_

\_\_\_\_\_ Ever been evicted? \_\_\_\_\_

Search areas: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

**\*Check the appropriate request desired:  Criminal,  Credit,  Driving record,  Drug scr.**

**\*Please print clearly**

**Fax only this form to 407-246-1377.**

**Applicant must fill out completely and sign at bottom**

**Only one form per applicant**

**Please copy all information directly from drivers license and SS card!**

**Instant results available online at [www.crimnalscreening.com](http://www.crimnalscreening.com)**

I am authorized to submit this application on behalf of the customer/applicant named above, and that the information provided is for the purpose of renting/employment and warranted to be true. I hereby authorize Criminalscreening.com to investigate the references listed pertaining to my financial responsibilities. I authorize Criminalscreening.com to conduct any background check necessary for the applied position including credit or driving reports.

\*\*Applicant's signature \_\_\_\_\_ Date \_\_\_\_\_