



**FAX COVER SHEET
FOR BACKGROUND CHECK REQUESTS**

To:	HUMAN RESOURCES		
Fax:	602-543-8412	Number of Pages (Including this Cover Sheet)	
Phone:	602-543-8400	Date:	
Subject:	BACKGROUND CHECK FOR Applicant Name		
From:			
Dept:		Cost Center:	

Instructions: Please check off the background check services you require, attach the authorization form, consent and disclosure form and employment application, and fax these to Human Resources at the fax number provided above.

<input type="checkbox"/> CRIMINAL RECORD SEARCH AND SOCIAL SECURITY TRACE (required package) <u>Options</u> <input type="checkbox"/> DEPARTMENT OF MOTOR VEHICLE REPORT (DMV) <input type="checkbox"/> EDUCATION VERIFICATION <input type="checkbox"/> PROFESSIONAL LICENSE VERIFICATION <input type="checkbox"/> PROFESSIONAL REFERENCES CONTACTED <input type="checkbox"/> SEXUAL OFFENDER DATABASE SEARCH
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Please send all **original** consent and disclosure and authorization forms to Allison Walas in HR