**JEFFERSON COUNCIL ON AGING, INC.**

**6620** Riverside Drive, Suite **216,** Metairie, **LA 70003**

Phone **(504) 888-5880** Fax: **(504) 888-5887**

Background Authorization

I hereby authorize and request any present or former employer, school, credit agency, financial institution, law enforcement agency, city, state, county and federal court and agency, military service or other persons having personal knowledge about me, to furnish bearer with any and all information in their possession regarding me in connection with an application for employment. I am willing that a photocopy of this authorization be accepted with the same authority as the original, and I specifically waive any written notice from any present or former employer who may provide information based upon this authorized request. I understand this authorization is to be part of the written employment application that I sign.

This notice serves as consumer notification that a report will be requested and used for the purpose of evaluating me for employment, promotion, reassignment or retention as an employee.

**May we contact your present employer:** Yes No

**PLEASE PRINT CLEARLY**

**Name:**

First Middle Last

**Gender:** \_Male \_Female **Date of Birth: Social Security Number:**

**Driver's License Number: Issuing State: \_\_ Exp. Date:**

**Street Address Telephone No.**

**City State**

**Email Address**

**Zip Code**

**If less than five years please list former addresses (write on back if necessary)**

**Street Address City State**

**Street Address City State Education:** (College/University; Address; State; Zip; Dates of Attendance; Degree)

Applicant's Signature Date

**Zip Code**

**Zip Code**

Revised 4/2017