

Background Screening Consent Form

Company Name: [Property Management Company Name]

Date: [Date]

To whom it may concern,

In connection with my application to provide services as an independent contractor for [Property Management Company Name], I hereby authorize the company and its designated agents to conduct a comprehensive background screening. I understand that this screening is a condition of my contract engagement.

I consent to the collection and review of the following information:

- Criminal background records (Federal, State, and Local)
- Identity verification and Social Security number validation
- Employment and education history
- Professional license and certification verification
- Driving records and motor vehicle reports

I authorize any consumer reporting agency, law enforcement agency, educational institution, or past employer to release information regarding my background to [Property Management Company Name]. I understand that this information will be used solely for the purpose of evaluating my eligibility to perform work on managed properties.

I acknowledge that a digital or photographic copy of this authorization shall be as valid as the original. I understand that I have the right to request a copy of any report generated and to dispute any information contained therein.

Contractor Information

Full Legal Name: _____

Social Security Number: _____

Date of Birth: _____

Current Home Address: _____

Driver's License Number/State: _____

Signature: _____ Date: _____