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Background Investigation Request

Date: _____	Client Code: _____
Requestor: _____	
Phone: _____	Fax: _____

APPLICANT NAME: _____
OTHER NAMES USED (maiden, alias, etc.): _____
DOB: _____ SSN: _____
DRIVER'S LICENSE NO: _____ STATE: _____
ADDRESS: _____
CITY, STATE, ZIP: _____
OTHER COUNTIES TO SEARCH (List County and State) : _____

Please mark the searches you would like conducted:

STANDARD PACKAGE	EXTENDED PACKAGE
SSN TRACE	7 YEAR COUNTY CRIMINAL RECORD
STATEWIDE CRIMINAL RECORD	FEDERAL DISTRICT CRIMINAL RECORD
COUNTY CIVIL RECORD	FEDERAL DISTRICT CIVIL RECORD
SEXUAL OFFENDERS REGISTRY	KNOWITALL CRIMEBASE SCAN
PRE-EMPLOYMENT CREDIT REPORT	STATE DRIVING RECORD
PROFESSIONAL LICENSE VERIFICATION	EDUCATION VERIFICATION
SINGLE EMPLOYMENT VERIFICATION	7 YEAR EMPLOYMENT VERIFICATION

*These searches do not include any applicable state or county fees. These fees vary from state to state and are subject to change with notice.
PLEASE FAX APPLICANT'S APPLICATION/SIGNED RELEASE WITH EACH REQUEST TO 215-352-4469.

Total Number of Pages for this Applicant, Including This Cover Page: _____