

**GENERAL RELEASE FORM  
(AND VOLUNTEER CREDIT RELEASE)**

The purpose of this release form is to obtain permission and notify you, the volunteer, that an investigation report will be conducted in the course of consideration of your work with the company below and may include some or all of the following searches: credit report, driving record, criminal record(s), workers compensation check, and verification of education, employment, reference, and professional license.

In connection with this request, I hereby authorize all corporations, employers, education institutions, law enforcement agencies, city, state, county, and federal courts, military services, and person to release information that they may have about my background history to the company that this form has been filed or their agent, Clear Investigative Advantage LLC. I consent to a background investigation and release the aforesaid parties from any liability and responsibility for obtaining my, the volunteer, background history.

Please read and sign this release to acknowledge that you, the volunteer, understand and give permission to Clear Investigative Advantage LLC and the company below to access your background history for volunteering purposes.

**\*PLEASE PRINT CLEARLY\***

**CLIENT**

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**VOLUNTEER**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ MI: \_\_\_\_\_

Maiden Name or Aliases Used: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ DOB\*: \_\_\_\_\_

Driver License Number: \_\_\_\_\_ State: \_\_\_\_\_

Current Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

\*Date of birth is required solely for the purpose of verifying background information and insuring the accuracy in the search of public records. It will not be used for any other purpose.

**VOLUNTEER SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_**