



AUTHORIZATION AND RELEASE

The undersigned applicant hereby authorizes VHDA to:

- Verify the undersigned's educational record and secure transcripts of that record, if so desired.
- Make inquiries of former employees as to the undersigned's qualifications and desirability as an employee.
- Secure background records and credit reports, if so desired.
- Social Security number verification.
- Secure a Motor Vehicle report, if so desired.

Print Full Name: _____

Applicant's Signature: _____

Date: _____

Position Applying for: _____