

Canada Consent to Disclose and Release Personal Information

Type or print clearly, illegible information cannot be processed.

A. Company Name trustHR | GObackgrounds
Company Address 303 A Street, Suite, 307, San Diego, CA 92101

B. Applicant Information Section

I authorize the above-named company through its "Agent" to obtain information regarding:
Consumer credit report, identity check, or address verification.

Applicant:

LAST/SURNAME

FIRST

MIDDLE

Maiden/Former Surnames or Name Changes:

Address:

STREET / PO BOX / RR #

CITY / PROVINCE / STATE

POSTAL CODE / ZIP CODE

Date of Birth:*

YEAR

MONTH

DAY

SIN:*

***Note:** The Date of Birth and SIN will only be used to complete the background check request.

C. Applicant Signature Section

By signing this waiver, I acknowledge full understanding of its content and meaning and hereby give my informed consent.

Applicant's Signature:

Date:

(MM/DD/YYYY)