



Background Request Form

Phone (888)-920-7233 Fax (888) 920-1248

Employer Use Only:

Client Name: MAC Inc. Date Requested: _____

City Location _____ Requester's name: _____

Location # _____ Location Phone # () _____

Location Fax #() _____ Email Address: _____

Services Requested (Please check the services you want):

- SS Trace Driving Record
- 7-Year Felony Misdemeanor
 - All Counties that Appear on SS Trace* for the past seven years
 - Only the Counties Listed on this Form
 - Search AKA if applicable
- Statewide Criminal
 - All States that Appear on SS Trace* for the past seven years
 - Only the States Listed on this Form
 - Search AKA if applicable
- Education Verification Employment Verification

*A SS Trace must be ordered for these selections.

Please print clearly:

Applicant Name: _____ Social Security #: _____ - _____ - _____

D.O.B.: ____ / ____ / ____

Also Known As (AKA's): _____ Date Last Used: _____

Driver's License Number: _____, State: _____

Current Address:

Address: _____

City: _____ State _____ Zip _____

Current County of Residence: _____

Additional Counties Resided (Note: List the zip code only if you do not know the county)

County: _____, State: _____ Or Zip Code: _____

County: _____, State: _____ Or Zip Code: _____

County: _____, State: _____ Or Zip Code: _____

Degree Information:

School Attended _____ City _____ State _____

Did you Graduate? _____ Degree Earned _____ Year of Grad _____

Employment Information:

Please list the following information regarding your most recent employers:

May we contact the present employer? Yes No

#1.) Company Name _____

City _____, State _____

Phone #_(_____) _____ Contact: _____

Dates worked: Start Date _____ End Date _____

Job Title: _____

#2.) Company Name _____

City _____, State _____

Phone #_(_____) _____ Contact: _____

Dates worked: Start Date _____ End Date _____

Job Title: _____

#3.) Company Name _____

City _____, State _____

Phone #_(_____) _____ Contact: _____

Dates worked: Start Date _____ End Date _____

Job Title: _____