

CITY OF BATH

BACKGROUND CHECK AUTHORIZATION

I,	, do understand that before
concluding the assessment of my qua	lifications for the position of
	City of Bath a background investigation
•	thorize the City of Bath or it's agents to
9	s use involving such things but not limited
	cords checks, contacting prior employers
1 0 1	ng to performance, contacting personal
	attainment. I hereby authorize all my
present and previous employers or the	
	erning my personal character, habits, or
employment performance. I also auth	
release and provide such records and	information as may pertain to my
attendance and performance.	
Applicant Signature	Date of Birth
Applicants Evil None (printed)	Alias or Other Name
Applicants Full Name (printed)	Alias of Other Name
Current Address	Previous Address (if less than 3 yrs)
Today's Date	
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<u>City Hall 55 Front Street Bath, Maine 04530</u> SHIPS HERITAGE PROGRESS