



# PRE-EMPLOYMENT BACKGROUND CHECK APPLICATION

## APPLICANT INFORMATION

Name:		
Address:		City:
State:	Zip:	Telephone:

## EMPLOYMENT HISTORY

Please provide all previous employers (starting with the most recent) for the past 5 years. You must account for any periods of unemployment of 12 months or more. If at any time during the past 5 years you were not employed, or were self-employed, you must provide evidence as to your whereabouts during the time in question; examples might include tax records, billing records, work orders or personal references.

Employer:		Telephone:	
Supervisor(s):			
Address:			
City:		State:	Zip:
Verified: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date: _____	Initials: _____	Contact Name: _____

Employer:		Telephone:	
Supervisor(s):			
Address:			
City:		State:	Zip:
Verified: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date: _____	Initials: _____	Contact Name: _____

Employer:		Telephone:	
Supervisor(s):			
Address:			
City:		State:	Zip:
Verified: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date: _____	Initials: _____	Contact Name: _____

**Explain any gaps in employment of more than 12 months:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**I certify that the statements and information on this application are truthful and understand that all identification badges issued shall remain the property of the Airport (City of Tallahassee, Department of Aviation) and must be returned upon termination of employment.**

\_\_\_\_\_

**Applicant's Signature****Company****Date**

**I hereby certify that the individual listed above has satisfactorily undergone a review and verification of the five years preceding the date the application was initiated. I also certify that this employee fully understands his/her responsibility to challenge any unauthorized person(s) in the Air Operations Area (AOA). It shall be the company's responsibility to ensure that all badges are returned to the Airport; any badges not returned will be assessed a fine of \$50.00 per badge.**

\_\_\_\_\_

**Company Authorized Signature****Date**