RUTGERS
University Human Resources

Background Check
Candidate Information Form

First Name | Last Name | Middle Name | Social Security No. | Date of Birth

Other Name(s) | Telephone No. | Email

Please list all addresses for the past ten years. If more than three, please use the reverse side of this form.

1) Full Street Address, City, State | From - To

2) Full Street Address, City, State | From - To

3) Full Street Address, City, State | From - To

Current/Previous Employment-Please list employment starting with the most current:

1) Employer | Full Street Address, City, State | Phone Number

Your Title | Supervisor's Name & Phone Number | Dates Employed: From - To

2) Employer | Full Street Address, City, State | Phone Number

Your Title | Supervisor's Name & Phone Number | Dates Employed: From - To

3) Employer | Full Street Address, City, State | Phone Number

Your Title | Supervisor's Name & Phone Number | Dates Employed: From - To

MAY WE CONTACT YOUR CURRENT EMPLOYER? ☐ YES ☐ NO

Complete only if applying for a position which requires a valid license: Driver's License Number | State Issued

Please list the highest education completed:

Name of School or University | Address

Degree or Diploma | Date Awarded | Name Under Which Attended

Professional License or Certificate:

License/Certificate Number | State Issued | Type of License/Certificate | Expiration Date

License/Certificate Number | State Issued | Type of License/Certificate | Expiration Date

APPLICANT SIGNATURE: _____ **Date:** _____