

**AUTHORIZATION TO PROCESS MY SOCIAL SECURITY NUMBER FOR VERIFICATION**

I hereby acknowledge and agree that the Safety Council of Southwest Louisiana (herein referred to as the Council) has a legitimate business need to verify my identity before I can be issued a Council badge which indicates, by virtue of its' existence, that my identity has been verified. I understand that by providing authorization to the Council and First Advantage, Inc. (herein referred to as FA), to process a verification of my Social Security Number, I shall not be issued a badge from the Council if the verification process fails to identify me as the proper holder of the Social Security Number I submit below.

**I authorize and instruct the Council and FA, a consumer reporting agency, to verify my identity through consumer reports and social security number information. I am providing this as my written instruction and authorization to the Council and FA to verify my identity through consumer reports and social security number information, with the stated understanding that the use of this information is limited to verification of my Social Security Number and can not be used, or released for use, by either FA or the Council for any other purpose. I understand that I have the right to make a request of FA, upon proper identification and the payment of any legally permissible fees, for the information in its files on me at the time of the request.**

Please Print- Note: The original, signed in blue ink, is the only acceptable copy.

Name: \_\_\_\_\_

Street address: \_\_\_\_\_ City \_\_\_\_\_

Parish/County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

SS# \_\_\_\_\_ DL# \_\_\_\_\_ State: \_\_\_\_\_

Birth (MM) \_\_\_\_\_ (DD) \_\_\_\_\_ (Year) \_\_\_\_\_ Race \_\_\_\_\_ Gender(M / F): \_\_\_\_\_

Other or Former Names: \_\_\_\_\_

Professional License: \_\_\_\_\_ State: \_\_\_\_\_ Type: \_\_\_\_\_ Number: \_\_\_\_\_

**By signing this I hereby acknowledge that I have read and understand the above and instruct the Council and FA to obtain, provide and use a consumer credit report to help verify my identity, with the understanding that the sole use of this information will be for Social Security Number Verification and it will not be released, or used, by either FA or the Council for any other purpose.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name \_\_\_\_\_

**NOTICE:** You **MUST** bring **TWO** forms of identification with you, one being **your original Social Security Card**, when you come to the Safety Council to process your SS# for verification.

SS# verification is a one time event. The fee is \$5.00.

Options for providing identification (one with photo required)

Valid drivers' license (with photo) expired over 30 days is not valid- Credit Card -State issued ID badge (with photo) issued for withdrawn drivers license - Social Security Card (required) -Valid US pass port (with photo) - State or Federal ID badge (with photo) - Birth Certificate *Other* (requires review and approval) Green Cards, new INS Cards & Foreign Pass Ports do require a second form of identification. There may be a delay in processing these applicants.

*Revised August 7<sup>th</sup>, 2007*