



Providence
FAMILY DENTAL

Information Release Waiver and Indemnity

As an applicant for a position with Providence Family Dental, I realize that a thorough background investigation will be conducted to qualify me for employment. I understand and agree that this background investigation may include, but is not limited to, interviews with and requests for information from my former employers and references, a check with duly constituted law enforcement agencies and/or judicial officers regarding criminal convictions pertaining to me, interviews with and requests for information from any educational institutions which I have attended or I am attending, and requests for information regarding my driving record.

I hereby authorize the release of any information related to my previous employment, criminal convictions (excluding sealed or expunged records of conviction or arrest), education, driving record, residence, or character, unless such information is restricted by law. I understand that only such information as is pertinent to the position for which I have applied shall be considered. I request that this document serve as my authorization to any persons, companies, government agencies, or other entities to furnish Providence Family Dental with any and all such information pertaining to me which may be in their possession.

I hereby release Providence Family Dental, all of its affiliated companies, their employees, offices, and agents, and any such person, company, government agency, or other entity from any liability arising directly or indirectly from the disclosure of any such information obtained in connection with such investigation.

I agree to indemnify and hold harmless Providence Family Dental, all of its affiliated companies, and their employees, officers and agents for all costs, damages, and expenses (including, but not limited to, reasonable attorney's fee) incurred as a direct or indirect result of any lawsuit or administrative proceeding brought against Providence Family Dental, any of its affiliated companies, or their employees, officers or agents which is related directly or indirectly to the disclosure of any such information or to such investigation.

***NOTE: The existence of a criminal conviction does not constitute an automatic bar to employment and will be considered only as it relates to the position(s) for which the applicant has applied and will be evaluated with respect to time, seriousness, and circumstances.**

Full Name: _____ Other Names Known By: _____

Date of Birth*: _____ Social Security Number: _____

Address: _____

Phone Number: _____ e-mail: _____

Driver's Licence Number: _____ State Issued: _____

Applicant's Signature: _____ Date: _____

**Date of birth is necessary to verify criminal and driving history (Note: The Age Discrimination in Employment Act of 1967, as amended, prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age.)*