



AUTHORIZATION FOR BACKGROUND CHECK
(International)

Please read and sign this form in the space provided below.
Your written authorization is necessary for completion of the application process.

I, _____, hereby authorize the Islamic Society of North America (ISNA) to investigate my background, including criminal records, and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying. I understand that ISNA will utilize an outside firm or firms to assist it in checking such information, and I specifically authorize such an investigation by information services and outside entities of the company's choice. (You may request in writing a copy of the report.)

OR

I, _____, do not authorize the Islamic Society of North America (ISNA) to investigate my background, including criminal records, and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying.

I understand that I may withhold my permission and that in such a case, no investigation will be done, and my application for employment or other position may not be processed further.

Signature of Applicant: _____ Today's Date: _____

Name (First, Middle, Last) Printed: _____

Date of Birth: _____ Gender: _____

Email Address: _____ Country of Residence: _____

Current Address: _____
(Number, Street, Apartment, City, Province, Postal Code)

Government ID (Type and #): _____

Passport #: _____ Country of Issuance: _____

Mother's Maiden Name: _____

Father's Full Name: _____

Driver's License Number: _____ Issuing Agency: _____ Expiration Date: _____

After signing the form, please return it by scanned email or by fax.

Email: diane@isna.net or Fax: 317-839-1805