

WORK ORDER REQUEST FORM

Your Company	
Contact	
Phone	
Fax or email	
No. Pages Sent	

Instructions:

Please send this form along with the Authorization for Release and other related Application documents to:

Fax: 610-287-2657

Email: orders@afactsco.com

Select the Type of Background Screening Tasks you would like to perform by checking all the boxes that apply:

<u>Criminal History</u>	
<input type="checkbox"/>	County Criminal
<input type="checkbox"/>	Statewide Criminal <i>(Court System)</i>
<input type="checkbox"/>	Statewide Criminal <i>(Official Law Enforcement)</i>
<input type="checkbox"/>	Federal Criminal
<input type="checkbox"/>	Sex Offender Registry
<input type="checkbox"/>	SSN Database Trace
<input type="checkbox"/>	DMV Driving History

<u>“Capture All” Search</u>	
<input type="checkbox"/>	Instant Nationwide Public Record Database Search.

<u>Verification Services</u>	
<input type="checkbox"/>	Employment Verification <i>(Resume needed)</i>
<input type="checkbox"/>	Education Verification <i>(Resume needed)</i>
<input type="checkbox"/>	Professional License <i>(Resume needed)</i>
<input type="checkbox"/>	Reference Checks <i>(Resume needed)</i>

<u>Screening Packages</u> <i>(for Multi Task Reports)</i>	
<input type="checkbox"/>	LEVEL 1 Basic Check
<input type="checkbox"/>	LEVEL 2 Intermediate Check
<input type="checkbox"/>	LEVEL 3 Comprehensive Check
<input type="checkbox"/>	LEVEL 4 Your Screening Package

REMARKS / SPECIAL REQUESTS

