



**MAINE MUNICIPAL ASSOCIATION  
BACKGROUND CHECK AUTHORIZATION FORM**

**For Town of Waterboro**

I, \_\_\_\_\_, understand that in order to assess my qualifications for the position of \_\_\_\_\_, a full background investigation is necessary. I, therefore, authorize the Maine Municipal Association (for the Town of Waterboro), to conduct an investigation which may include but not be limited to: verification of information provided by me to the Maine Municipal Association; a financial management check; contacting persons, clients, business associates, professional organizations, educational or other institutions, and government and law enforcement agencies regarding work performance, character references and record history information; contacting employers for performance information; and verifying educational attainment. All the information and materials I have provided to the Town of Waterboro, as part of the employment process, are accurate and truthful.

I further authorize all my present and previous employers, or references, to furnish information concerning my personal character, habits or employment performance and authorize schools that I have attended to provide verification of educational attainment and other relevant information.

Applicant Name: \_\_\_\_\_  
(Please list maiden name or any other names previously used.)

Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/Town: \_\_\_\_\_

State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Social Security  
Number: \_\_\_\_\_

Date of Birth \_\_\_\_\_

Drivers License # \_\_\_\_\_ State of Issuance \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

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