



CUMBERLAND HOUSING
Unlocking the Doors for Your Future

AUTHORIZATION TO RELEASE EMPLOYMENT INFORMATION

I consent to allow Cumberland Housing, to obtain information from the individuals or organizations listed below, for the purpose of verifying my eligibility for employment with Cumberland Housing.

Past and Present Employers	Credit Bureaus	Courts
Child Care & Child Support	Unemployment Office	Personal References
U.S. Dept. of Veterans Affairs	Educational Facilities	Law Enforcement Agencies

I agree that photocopies of this authorization may be used for the purposes stated above. If I do not sign this authorization, I understand that I may not be eligible for employment.

Please print legibly

Full Legal Name: _____
First Middle Last Suffix

Maiden Name or Alias (s) if Applicable: _____

Current Address: _____
House or P.O. Box Number Street Name

City State Zip Code

Previous Address: _____
House or P.O. Box Number Street Name

City State Zip Code

Sex: Male Female Social Security Number: _____

Race: Caucasian/White African American/ Black Hispanic/Latino
 American Indian/Alaska Native Middle Eastern Asian
 Native Hawaiian/Other Pac. Islander Two or more races

Marital Status: Single Married Separated Divorced

Date of Birth (mm/dd/yyyy): _____ Place of Birth (city/state): _____

Signature Date

Form # 602 Revised 9/15/2016



The Housing Authority of the City of Cumberland
635 East First Street, Cumberland, MD 21502-4362



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