

**INDEPENDENT CONTRACTOR INFORMATION
(INDIVIDUAL)**

NAME _____

ADDRESS _____

TELEPHONE NUMBER _____

ALTERNATE
TELEPHONE NUMBER _____

SOCIAL SECURITY NO. _____

BRIEF DESCRIPTION OF YOUR WORK EXPERIENCE

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES / NO
(IF YES, EXPLAIN ON THE BACK OF THE SHEET)

YOU UNDERSTAND AND AGREE THAT WE MAY PERFORM A BACKGROUND CHECK, INCLUDING A CRIMINAL BACKGROUND CHECK, ON THE PRINCIPAL OFFICER OF THE COMPANY. BY SIGNING BELOW, YOU AGREE TO SUCH A CHECK.

Signature

Date