

Background Check Authorization and Release of Liability

The Retirement Systems of Alabama ("RSA") is hereby authorized to complete a background investigation on me, including a review of any state or national name or fingerprint-based criminal history records. This background check is required for the issuance of a security clearance to the RSA Dexter Avenue Data Center Facility.

I fully understand that any information obtained by said background investigation is to be used only for determining my suitability for working for, serving as a tenant, or providing contract services to the RSA which may allow access to secure data center facilities. I understand and acknowledge that such a background investigation will be completed prior to me obtaining access to the RSA Dexter Avenue Data Center Facility and that I willingly and voluntarily accept such condition as is evidenced by my signature upon this document.

I certify that all of the personal identifying information provided herein is accurate.

I hereby indemnify, release, and hold harmless RSA, its officers, agents and employees from and against any and all claims, demands, actions, suits, and proceedings arising out of the conduct of such background investigation, including any claim or misuse of any information received by RSA as a result of said background investigation.

PLEASE TYPE OR PRINT.

Full Name:			
Date of Birth (month/date/year):		_Sex/Gender	_Race
Social Security #:		_Driver's License # _	
States Lived in Within Last 10 Years:			
	DONE this	_day of	, 2
	SIGNATURE		
For RSA Use Only - Please date and initial.			
Name-Based Check:			
Fingerprint-Based Check: (Required if Out of State)			
Other:			