

# Industrial Foundation of America

402 E. San Antonio Ave  
Boerne, Texas 78006  
Phone: 800-592-1433  
Fax: 800-628-2397

Membership # \_\_\_\_\_

Sub # \_\_\_\_\_

Company Name: \_\_\_\_\_

Requester Name: \_\_\_\_\_

Fax # (        ) \_\_\_\_\_

Phone # (        ) \_\_\_\_\_

**IS checks are automatically run for Texas, Oklahoma, Louisiana and New Mexico.  
Please indicate state required of outside the four state area**

Request information on the following:

			IS	IS State
Name: <i>First</i>	<i>Middle</i>	<i>Last</i>	No Record (IFA use only)	Record (IFA use only)
Social Security #	DOB		MVR	CRIM
Driver's License #	State		EDC*	Credit**
CRIM-City	County (if known)	State		
CRIM-City	County (if known)	State		
Comments (IFA use only)			IFA Rep	

			IS	IS State
Name: <i>First</i>	<i>Middle</i>	<i>Last</i>	No Record (IFA use only)	Record (IFA use only)
Social Security #	DOB		MVR	CRIM
Driver's License #	State		EDC*	Credit**
CRIM-City	County (if known)	State		
CRIM-City	County (if known)	State		
Comments (IFA use only)			IFA Rep	

			IS	IS State
Name: <i>First</i>	<i>Middle</i>	<i>Last</i>	No Record (IFA use only)	Record (IFA use only)
Social Security #	DOI		MVR	CRIM
Driver's License #	State		EDC*	Credit**
CRIM-City	County (if known)	State		
CRIM-City	County (if known)	State		
Comments (IFA use only)			IFA Rep	

IS - Industrial Safety    MVR - Motor Vehicle Report    CRIM - Criminal    EDC - Education Degree Confirmation

You may request as many names as needed. Duplicate this form if necessary.

\* Education verification requests should be included on a separate sheet. We are able only to verify information given to us, so be specific when submitting requests. Include name of college/university/trade association (with city and state), dates of attendance, date of graduation and degree(s) earned.

\*\* Credit checks require the employee's current physical address and a signed release.