

AUTHORIZATION TO CONDUCT REFERENCE CHECKS

Applicant: Please read the information on this form carefully and completely.

I have applied for employment with _____. I authorize _____ to conduct a reference check with all my present and/or previous employer(s), educational institutions, and personal references, whether such references are provided by me or not.

My signature below authorizes my former or current employers, educational institutions I have attended, and personal references to release information that _____ requests about my employment, educational, or personal background, whether the information is positive or negative.

I authorize my current and former employers to release all credible information related to any acts of egregious misconduct to _____. Such information includes copies of all related documents in personnel, investigative, or other files.

I knowingly and voluntarily release all former and current employers, educational institutions, and personal references and _____ from any and all liability arising from their giving or receiving information about my employment history, my academic credentials or qualifications, my personal character, and my suitability for employment with _____.

This form may be photocopied or reproduced as a facsimile, and these copies will be as effective as a release or consent as the original which I sign.

Signature:

Date:

Print Name:

Previous Names Used (if applicable):

Last 4 Digits of SSN or ITIN: