

NOTIFICATION AND RELEASE

Sales Representative: _____

University Name _____

Access ID _____ BeeCheck ID _____ CAC Code: _____

The information contained in my application for an employment opportunity with (University Name) _____ (hereinafter, "The University") is true to the best of my knowledge and belief. I understand that any misrepresentation or false statement made by me in connection with the application or any related documents which is deemed material by The University shall result in The University not utilizing me as a volunteer, or if utilizing me, terminating me as a volunteer. I understand and agree that all information furnished in my application and all attachments may be verified by The University or its authorized representative. I hereby authorize all individuals and organizations named or referred to in my application and any law enforcement organization to give The University all information relative to such verification and hereby release such individuals, organizations and The University from any and all liability for any claim or damage resulting therefrom. I hereby acknowledge that I have been informed by The University that The University may seek to obtain a consumer report and/or investigative report that will include personal information regarding me, including but not limited to, educational history, work references, driving record, drug testing and criminal convictions or arrest records if allowed, in order to assist The University in making certain decisions regarding volunteers. I further acknowledge notification by The University that reports may be provided to The University by other firms subcontracted for that purpose. I, my heirs, assigns and legal representatives, hereby release and fully discharge The University, its parent and affiliated companies and the respective officers, directors, shareholders, employees, agents of each, including subcontractors, from any and all claims, monetary or otherwise, that I may have against The University, its parent, affiliates or subcontractors, arising out of the making, or use of, either a consumer report and/or investigative report, including any errors or omissions contained or omitted from such reports or investigations. The University agrees to inform you if a volunteering decision has been influenced by information contained in a consumer report, made at our request by Castle Branch Inc. You may obtain a free copy of the report within sixty days by calling Castle Branch, Inc at (888) 723-4263. The University will make available to you "A Summary of Your Rights Under The Fair Credit Reporting Act."

PLEASE PRINT

List all names that you have used during the last seven (7) years (including married, maiden, and aliases):

Name (First, Middle, Last): _____ Date of Birth (Mo./Day/Yr.) _____ / _____ / _____

Maiden Name or "AKA" (First, Middle, Last): _____ Dates Used (Mo./Yr.) from _____ / _____ to _____ / _____

Social Security # _____ - _____ - _____ Driver's License # _____ State _____

Current and Previous Address(es). PROVIDE ALL ADDRESSES FOR PREVIOUS 7 YEARS. Use extra page if necessary.

Current Street _____ From: _____ / _____

City, State, Zip, County _____ To: _____ / _____

Street _____ From: _____ / _____

City, State, Zip, County _____ To: _____ / _____

Street _____ From: _____ / _____

City, State, Zip, County _____ To: _____ / _____

Applicant Signature (required): _____ Date (Mo./Day/Yr.): _____

signature required

For Employer Use Only: Please mark (✓) the searches to be conducted.

Contact: _____ Email: _____
Phone: _____ Fax: _____

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Notes: