

**Authorization and Consent for Release of Information  
Human Resource Services  
Northern Illinois University**

I \_\_\_\_\_, an applicant for employment with Northern Illinois University, for the position of \_\_\_\_\_ hereby expressly authorize and consent to a full review and disclosure of all employment, education, criminal, or credit history information concerning myself, including any criminal conviction information. This information will be released to a duly authorized agent of Northern Illinois University. I also understand that I may obtain a copy of the report(s) utilized for this purpose by checking the box provided. (Please check the following box if you would like a copy of the report(s)).

I further understand that if the information obtained results in an adverse employment action that I will receive a copy of the report prior to the implementation of any adverse employment action. As such, I will have a reasonable opportunity to respond (five business days) to the reported information prior to the implementation of any adverse action.

I understand that any information obtained by a criminal history background investigation which is acquired as a result of this release authorization will be considered in determining my suitability for employment at Northern Illinois University. I also certify that any person(s) who may furnish such information concerning me shall not be held liable for giving this information; I do hereby release said person(s) from any and all liability that may be incurred as a result of furnishing such information. I further release Northern Illinois University from any and all liability which may be incurred as a result of collecting and considering such information.

I understand that a photocopy of this release form will be valid as an original thereof, even though said photocopy does not contain an original writing of my signature and/or is transmitted via e-mail or electronic communicative system.

I have read and fully understand the contents of this "Authorization for Release of Information" and affirm that the information contained herein is both true and accurate as indicated by my signature below:

Print Name \_\_\_\_\_  
                                First                          Middle Initial                          Last

Signature \_\_\_\_\_ Date \_\_\_\_\_

Social Security Number \_\_\_\_\_

Drivers License Number \_\_\_\_\_

Date of Birth \_\_\_\_\_ State of License \_\_\_\_\_

**Please list your current and previous address(es) for the past seven (7) years beginning with your current residence. If additional space is needed, please list on the reverse side.**

Address \_\_\_\_\_  
                                Street                          City                          County                          State                          Zip

Address \_\_\_\_\_  
                                Street                          City                          County                          State                          Zip

Address \_\_\_\_\_  
                                Street                          City                          County                          State                          Zip

Have you ever been **convicted** of a misdemeanor or felony? Yes \_\_\_ No \_\_\_ If yes, please explain.

NOTE: A conviction record will not necessarily be a bar to employment; factors such as age at the time of the offense, seriousness and nature of the conviction and evidence of rehabilitation will be taken into account with respect to the terms of the position being applied for. Misrepresentations or omissions of facts in your response to this question may be a cause for rejection of your application or immediate termination of employment.

<u>HIRING DEPARTMENT USE ONLY</u>	<u>HUMAN RESOURCES USE ONLY</u>
TYPE OF POSITION (CIRCLE ONE): CS-PERM CS-EXTRA HELP FAC GA SPS SW ACCT # _____ ACCT TITLE _____ POSITION ID _____ DEPT _____ SUPERVISOR _____	TYPE OF CHECK (CIRCLE ONE): COMPREHENSIVE CRIMINAL AND ID VERIFICATION ONLY 365 DAY UPDATE OTHER (SPECIFY) _____  APPROVED FOR OFFER: ___ YES ___ NO DATE _____ HR REP. SIGNATURE _____