

HireRight Access Request



Northern Illinois University

Human Resource Services

Request Type: NEW CHANGE REMOVE

Requestor Information

First Name:

Last Name:

I attest that I am a current active faculty or staff employee of Northern Illinois University and am authorized to make this request.

User Information

First Name:

Last Name:

Employee ID:

Email Address:

Confirm Email Address:

Contact Phone Number:

Comments:

Authorizer Information

This request can be signed and scanned, or you can use an Adobe E-Signature.

Signature: _____
(Dean, Chair or Director)

_____ Date

Note: Please send completed forms to HRHireRight@niu.edu