

Authorization and Request for Release of Information Form

I, (print full name) authorize and request the Kent State University Human Resources to make a thorough investigation of my past criminal records and if applicable, my past traffic records to aid in determining possible employment. This investigation may include an inquiry of the Kent State University Police Department records, written inquiry to the Ohio Bureau of Criminal Identification and Investigation, a written inquiry to the Ohio Bureau of Motor Vehicles, and other inquiries as judged appropriate by Kent State University Human Resources.

I hereby release Kent State University, Kent State University Human Resources and its employees from any kind and all liability for damages of whatever kind or nature that may, at any time, result to me on account of compliance or attempts to comply with this information and understand information obtained from this check could result in a denial of employment.

*After completing this document, Human Resources will contact you to obtain your social security #, date of birth and driver's license # (if applicable).

CURRENT APPLICANT INFORMATION							
Name (print)							
Address (current)							
City	State	Zip		Telepho	ne Numb	er	
School District							
ADDRESS INFORMATION PAST 10 YEARS							
County State	County	State		County	State		
County State	County	State		County	State		
County State	County	State		County	State		
Applicant Signature:				Date:			

Position Title Applying For:							
Hiring Department:			Account Number	r for IDO	C:		
Driving Record Found:	YES	NO	Criminal Record Found:			YES NO	
Date:			Completed By:				
HR Data Gathered:							

Security Check Release Form 2008. doc