

## Reference Checking Consent & Authorization Form

Read carefully and completely before signing.

### SECTION I – CONSENT

I have applied for employment with the University of Washington and have provided information about my previous employment. My signature below authorizes my former or current employers and references to release the contents of my employment record with their organizations and to provide any additional information that may be necessary for my application for employment to the University of Washington, whether the information is positive or negative.

I authorize the University of Washington to investigate all statements made in my application for employment and to obtain any and all information concerning my former/current employment. This includes my job performance appraisals/evaluations, wage history, disciplinary action(s) if any, and all other matters pertaining to my employment history. I knowingly and voluntarily release all former and current employers, references, and the University of Washington from any and all liability arising from their giving or receiving information about my employment history, my academic credentials or qualifications, and my suitability for employment with the University of Washington.

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.

### SECTION II – SIGNATURE

Applicant Name (please type or print): \_\_\_\_\_

Applicant Signature:

Date: