Reference Checking Consent and Authorization Form

Disclosure

Please read the information on this form carefully and completely.

I have applied for employment with the University of Washington and have provided information about my previous employment. I authorize the University of Washington to conduct a reference check with my present and/or previous employer(s). I understand that reference information may include, but not be limited to, verbal and written inquiries or information about my employment performance, professional demeanor, rehire potential, dates of employment, salary and employment history.

My signature below authorizes my former or current employers and references to release information regarding 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 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.

I further authorize the University of Washington to obtain feedback and references from my supervisors over the course of my employment with the University of Washington. I understand that subsequent and continued employment with the University of Washington may be subject to this feedback.

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.

Name:(please print)	_ Signature:
Date:	
Cell Phone:	Alternate Phone:
Email Address:	