



APPLICANT - AUTHORIZATION AND RELEASE FOR EMPLOYMENT INQUIRIES AND/OR REFERENCE CHECKS

I am an applicant for employment with Wichita State University (hereinafter "University") and I recognize and understand the need for the University to be fully informed as to my fitness for employment, including education, academic credentials, background information and prior employment record.

In specific reference to my application for employment, I hereby certify that, to the best of my knowledge and belief, all information provided by me to the University throughout the search and selection process is true, correct and complete. I acknowledge and understand that providing false, inaccurate or misleading information will be sufficient and complete justification to reject my application and make me ineligible for future consideration for employment with Wichita State University or termination from employment, if the hiring decision was based or premised, in any way, on false, inaccurate or misleading information provided by me or on my behalf.

I acknowledge and understand that representatives of the University may choose to contact individuals other than those persons whom I have or will indicate as my references and I hereby authorize and consent to such contact. I am also advised and understand that offers of employment are contingent upon satisfactory criminal background check (as required by Kansas Board of Regents Policy), educational credential verification, and, in some cases, a credit check. In the event a criminal background check (or credit report) is deemed to require consideration of an adverse decision regarding my employment with Wichita State University, I will be provided with a copy of the report[s] and a description in writing of my rights under the federal Fair Credit Reporting Act.

In consideration of the opportunity to be considered for employment with the University, I hereby specifically consent to and authorize a criminal background check (and/or credit report), and do hereby authorize all past and current employers, academic institutions, and other appropriate persons or entities to release to the University and its representatives, information regarding me, my employment history and/or my education, including transcripts and other information considered to be education records under the Family Educational Rights and Privacy Act of 1974, that will reasonably assist the University in considering my abilities, experience and qualifications for the position being sought.

This authorization and release is valid from the date set out below and shall remain valid for a period of ninety (90) days following the date of signature. A copy of this authorization and release is as valid as the original.

I understand that in the event I accept a contingent offer of employment with the University, I will be provided a link by email to the Validity website where I will make application for a background check through the services of Validity, the company performing background checks for the University.

Applicant's E-mail address: _____

Applicant's Phone # _____ myWSU ID# _____ (if applicable)

Signature

Printed Name

Date of Signature

REQUIRED: Information in this box to be completed by the hiring organization:

Position name: _____ Position number: _____

Hiring org #: _____ Hiring org name: _____

Position funded by: GU funds _____ RU funds _____

If RU funded position – please provide: Billing org # _____ Billing fund # _____

Type of Hire: Benefits Eligible _____ Grad/Student _____ Lecturer _____

Volunteer _____ Temporary _____

Search Chair/Hiring Mgr Name: _____ Ext. _____

Divisional approval signature: _____ Ext. _____