

Criminal History, Education and Employment Verification Authorization and Release

To be employed in or hold a position in any of the UNT System components that is designated security sensitive, you must satisfactorily complete a criminal history check, an education verification (where required) and an employment verification. State law authorizes institutions of higher education to obtain criminal history information on applicants for employment for security sensitive positions.

Instructions: Please print or type all of the requested information. Return the form via email to hremloyment@untsystem.edu or fax to 940-369-5549. This form must be submitted and results received prior to the first day of employment in a security sensitive position.

Last Name:	First Name:	Middle Name:
Maiden Name:	List Any Former Names Used:	Male <input type="checkbox"/> Female <input type="checkbox"/>
Complete Current Address (Street, City, State & Zip Code):		

This form authorizes UNTS to obtain criminal history information, education verification, and employment verification.

Acknowledgement and Authorization: I hereby authorize the agent for University of North Texas System (UNTS) Human Resources to furnish any UNTS component information related to my criminal history, education and employment. I hereby release the UNTS and all its officers and employees, from all liability resulting from the use of information obtained as part of this Criminal History, Education, and employment Verification Authorization and Release. I certify that the information provided by me on this form is true, complete and correct to the best of my knowledge. I understand that any false information provided herein will void my application for employment and may result in termination. I further understand that a criminal history may disqualify me for employment at any UNTS component.

The Texas Privacy Act, with a few exceptions, allows you to be informed about the information The University of North Texas System collects about you to review and obtain the information on this form and to correct any information you believe is incorrect.

Signature Applicant/Employee: _____ **Date:** _____