



Release Form for Reference Checks

RELEASE AUTHORIZATION

I, (please print name) _____, hereby authorize investigation of any information contained in the Application for Employment and/or supplemental materials I have submitted in consideration for the position of _____, as may be needed to arrive at an employment decision. I authorize any or all education institutions and prior employers listed in the application for Employment to provide information they may have concerning me as it may relate to consideration of my application for this position. I understand the city will be contacting both individuals suggested by me and others whom I may not have suggested. I release those parties from any and all liability or claims for damage that may result from such.

This release supersedes any agreement I may have previously made to the contrary with any such person, school, employer, or organization.

A facsimile of this signed release shall have the same force and effect as the original release signed by me.

Applicant's Printed Name

Applicant's Signature

Date



Pre-Employment Reference Check Form

Please provide three (3) professional references. This includes present or former employers, co-workers, and present or former professors. Please do not include family members.

1 ST REFERENCE NAME	PHONE NUMBER		EMAIL
Click here to enter text.	Click here to enter text.		Click here to enter text.
TITLE	RELATIONSHIP	YEARS KNOWN	
Click here to enter text.	Click here to enter text.	Click here to enter text.	
2 ND REFERENCE NAME	PHONE NUMBER		EMAIL
Click here to enter text.	Click here to enter text.		Click here to enter text.
TITLE	RELATIONSHIP	YEARS KNOWN	
Click here to enter text.	Click here to enter text.	Click here to enter text.	
3 RD REFERENCE NAME	PHONE NUMBER		EMAIL
Click here to enter text.	Click here to enter text.		Click here to enter text.
TITLE	RELATIONSHIP	YEARS KNOWN	
Click here to enter text.	Click here to enter text.	Click here to enter text.	

Please provide one (1) personal reference. Please do not list family members as a personal reference.

PERSONAL REFERENCE NAME	PHONE NUMBER		EMAIL
Click here to enter text.	Click here to enter text.		Click here to enter text.
TITLE	RELATIONSHIP	YEARS KNOWN	
Click here to enter text.	Click here to enter text.	Click here to enter text.	

Applicant's Printed Name

SIGNATURE

DATE