

Indiana University
Background Check Consent Form
for Academic Hires

Thank you for your interest in employment at Indiana University. As part of the hiring process, certain information may be requested as it relates to the appointment you've been offered. Your signature on this document indicates that you have read and understand the conditions set forth by Indiana University.

I understand that Indiana University will request that GIS, Inc, perform an employment background check to determine my suitability for the appointment I've been offered; I hereby authorize the University to secure the information necessary to make such a decision. I further understand that while an offer of appointment will precede any such investigation, the appointment is contingent upon a determination of my suitability for the position I've been offered.

I certify that I will provide the University acceptable documents on my first day of employment that show that I am legally permitted to work in the United States.

By signing this document, I authorize the University to conduct a background investigation. I also certify that the information provided in my resume and/or letter of employment is accurate, and I understand that any information falsely provided will be sufficient grounds for the immediate termination of my employment.

I hereby authorize the release of the information related to this review, and further release from liability any and all individuals and organizations who provide information to Indiana University concerning my professional competence, ethics, character, criminal record (if any), and qualifications and authorize my prior employers to release any such requested information about my employment.

Please note: You will not be considered for employment if you do not provide the authorization for the University to conduct the background investigation identified above. Date of birth and Social Security number will be used only to complete the background check and will not become part of the selection process.

Legal Name (Print) _____
_____ (First) _____ (Middle) _____ (Last)

Name _____
(Maiden/Alias) _____

Signature _____ Date _____

Date of Birth _____ Social Security No. _____

Address _____
_____ Street _____ City, State, Zip

Phone Number _____

Previous Address:
_____ Street _____ City, State, Zip _____ to _____
Dates of Residence

(Federal Law prohibits discrimination against persons age 40 and over. Date of birth is used for verification purposes only and is not released to the hiring official or search committee prior to an individual's acceptance of employment. All criminal history report information is restricted to administrative officers with hiring responsibilities).