



**BACKGROUND & REFERENCE CHECKING
AUTHORIZATION OF DISCLOSURE**

All information provided by me as part of my application for employment is accurate and true to the best of my knowledge. I understand and agree that any misrepresentation or omission of information by me may result in my rejection from employment or, if hired, in my discharge.

I understand and agree that as part of its evaluation of my suitability for employment, **Nazareth Academy d/b/a Nazareth Elementary** should receive freely information and opinions about my educational background, previous work experience and work-related qualifications, behavior and character.

I therefore, knowingly and voluntarily, authorize and consent to the disclosure of information and opinions concerning me contained in files of the educational institutions I have attended, personnel files of my current and former employers and other individuals including personal and professional references to RBA Staffing acting on behalf of **Nazareth Elementary**.

I consent specifically to the release of any information and opinions by my current and former educators and employers about my education or work by their agents and employees to RBA Staffing acting on behalf of **Nazareth Elementary**. I also authorize RBA Staffing to access financial and credit records available through credit agencies or bureaus, criminal background inquiries, public records and public record databases and driving records. I also authorize and consent to the disclosure by RBA Staffing to **Nazareth Elementary** of any information and opinions it obtains about me. I understand that if I would like additional information about the investigation that may be done by RBA Staffing, I should contact RBA Staffing, 150 State St., Rochester, New York 14614, in writing.

This authorization, in original or copy shall be valid for this and any future reports and updates that may be requested. These reports may be attained at any time after the receipt of my authorization if I am hired by **Nazareth Elementary**, throughout my employment. I intend that a copy of this Authorization be as valid as the original.

I also understand that the information I provide regarding my date of birth will be used for the sole purpose of gathering the above mentioned information correctly, and will not be used to discriminate against me in violation of any law.

| | | |
|---|---------------------------------|-------------|
| Applicant Name PRINTED (First Name, MI, Last Name) | Social Security Number | |
| Other Last Names/Alias/AKA's used in last 7 years | Applicants Date of Birth | Date |

Please list all **counties** that you have lived in within the last seven (7) years including the current one.

| County (or City if unknown) | State | Years of Residency | |
|------------------------------------|--------------|---------------------------|-----|
| | | From: | To: |

For internal use only:
 Article 25-380-J: ____over ____under
 State of Residency _____

 Applicant Signature



**REFERENCE & BACKGROUND CHECKING
RELEASE OF CLAIMS**

I understand that the information and opinions concerning me disclosed to RBA Staffing, and from RBA Staffing to **Nazareth Elementary** may include both favorable and unfavorable material. I knowingly and voluntarily release each of my current and former educators and employers, RBA Staffing, and their respective agents and employees, and all other individuals and entities providing information, from any and all claims and liabilities, including but not limited to claims for defamation, retaliation, discrimination, damages, costs and attorneys fees, which have arisen or may arise in the future related to the information and opinions provided to RBA Staffing and from RBA Staffing to **Nazareth Elementary**.

I understand that my execution of this Release is a condition of my being considered for employment by **Nazareth Elementary**. My execution of this Release is for the benefit of **Nazareth Elementary**, my former educators and employers, and RBA Staffing, and to assure that they are free to disclose information and opinions about me.

I intend that a copy of this Release be as valid as the original.

Applicant Name PRINTED

Applicant Signature

Social Security Number

Date