REFERENCE CHECK HOLD HARMLESS STATEMENT

AUTHORIZATION TO RELEASE INFORMATION	
I hereby authorize all of my former employers, school officials, and other individuals to release to any and all information concerning my prior employment or any other pertinent information they may have. I further release and hold harmless all parties and persons from any and all liability for any damages that may result from furnishing such information.	
I certify that the answers given herein are true and complete to the best of my knowledge.	
I authorize investigation of all statements contained on my <i>Application for Employment Form</i> , resume, or furnished elsewhere, as may be necessary in arriving at an employment decision.	
I understand that misrepresentation of any material fact may be cause for rejection of my application or, if already hired, termination of my employment.	
I also understand that, if employed, I am required to abide by all policies, procedures, rules, and regulations of the company.	
Applicant Signature:	Date:
Applicant Name Printed:	
Company Representative	Date: