Notification and Authorization for Release of Information for Credential Background Check

To be distributed to and completed by job candidates during the interview process.

Notice: In connection with your application for employment at The University of Iowa, credential background checks may be requested or made on you, including academic degrees, certifications, and licenses. Although regulated by the Fair Credit Reporting Act, this check will not include a credit check. Failure to provide consent will deny further consideration of your application. If The University of Iowa believes you have misrepresented a credential, you will be informed of this discrepancy and be given a reasonable opportunity to provide clarifying information. If upon further review, it is The University of Iowa's judgment that a material misrepresentation has occurred, you will no longer be considered for employment, or if already employed at The University of Iowa, terminated. You will be informed in writing of such action. If you seek future employment at The University of Iowa, the hiring department may be informed of this action and will be directed to take into consideration this information when evaluating your application and/or appointment.

Authorization: I hereby authorize without reservation, any party or agency contacted by The University of Iowa, any of its agents, or any entity employed by The University of Iowa for such purposes to furnish the above-mentioned information.

I have the right to make a request of The University of Iowa or its agents, under the federal Fair Credit Reporting Act, upon proper identification and the payment of any authorized fees, for the information in its files on me at the time of my request. I have received a copy of "A Summary of Your Rights Under the Fair Credit Reporting Act."

Signed: _____   Date: _____

– PLEASE PRINT –

Name of Applicant: _____
                               (First Name, Middle Name, Last Name))

Other Names Used: _____   Date of Change: _____

Other Names Used: _____   Date of Change: _____

Social Security Number: _____   Birth Date: _____

Street Address: _____

City, State, Zip: _____

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– FOR INTERNAL USE ONLY –

Verification Completed (Date): _____

Hiring Department Verifier (Name): _____

Methodologies: (check all that were utilized)

	Degree* Verify	Granting Institution	Original or Certified Copy
Academic Degrees			
Certifications			
Licenses			

*Degree Verify (URL)