



Background Check Disclosure and Release

TO BE COMPLETED BY CANDIDATE/APPLICANT (Please type or print legibly):

First Name (Legal Name)	Middle Name	Last Name	Email Address
Position Title		Department	Department Contact Name

I understand that Appalachian State University requires a criminal background check either as part of its pre-employment background investigation or after employment has begun under a contract which makes employment contingent upon completion of a criminal background check. A consumer or credit reporting agency that has a contractual relationship with the University will provide this report. I also understand that, while a criminal record could adversely affect a candidate's prospects for employment; such a record does not necessarily eliminate a candidate from employment with Appalachian State University, as each criminal background will be reviewed with respect to a variety of factors, including, but not limited to, the nature and seriousness of any offenses in relation to the position for which a candidate has applied.

By signing this document, I authorize Appalachian State University to procure a criminal background report from a consumer or credit reporting agency, and I release the University of North Carolina, Appalachian State University, the State of North Carolina, members of their boards, officers, employees, agents, and representatives from all liabilities, losses, costs, damages, claims or causes of action of any kind or nature whatsoever, and expenses, including attorneys fees, arising or claimed to have arisen out of the University's obtaining a criminal background check or communicating, utilizing, or relying upon the information contained therein for the purposes described above. I further authorize any party or agency contacted by Appalachian State University or its agent to furnish criminal background information and hereby release all such parties involved from any liability and responsibility for damages for having furnished or relied upon such information in good faith. I further understand that the provision of my social security number and date of birth is voluntary and not required by any statute, that the information will be used for the sole purpose of gathering the above-mentioned information about me accurately, and that it will not be used to discriminate against me in violation of the law. A facsimile or photographic copy of this authorization will be considered to be as valid as the original.

Upon receipt of the Background Check Disclosure and Release, you will receive a separate email from our vendor, InfoMart. InfoMart is an investigative screening agency which conducts a variety of consumer reports, including background checks. The email will provide you with a link to a secure website where you will complete the background check process online. By completing this online information in InfoMart you are giving InfoMart permission to use your Social Security Number to order the background check and permission to release your results to Appalachian State University.

Candidate/Applicant Signature: _____ Date: _____

**Submit completed and signed form within 2 days of receipt of this form.
Faculty: Return completed and signed form with Contract to Academic Affairs.**