



NORTHWESTERN
UNIVERSITY

**Authorization to Obtain References and
Release of Information for Employment Purposes**

I, _____, authorize the complete release of records or data pertaining to me which an individual, company, firm, corporation or public agency may have. I hereby authorize and request any present or former employer, school, police department, financial institution or other persons having personal knowledge of me to furnish Northwestern University or its designated agents with any and all information in their possession regarding me in connection with an application of employment. I am authorizing that a photocopy of this authorization be accepted with the same authority as the original.

I hereby release Northwestern University and its agents, officials, representatives or assigned, including officers, employees or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at anytime result to me, my heirs, family or associates because of compliance with this authorization and request to release. You may contact me as indicated below. I understand that a copy of this authorization may be given at any time, provided I do so in writing.

Applicant Information: (Print information clearly)

Name (Full) _____ Maiden Last Name(alias) _____

Applicant Signature: _____

Today's Date: _____ / _____ / _____
Month Day Year