

CRIMINAL HISTORY CHECK AUTHORIZATION/EMPLOYMENT VERIFICATION FORM

(to be completed after a contingent offer of employment has been made/accepted)

VERIFICATION OF INFORMATION (if app	licable):		
VERIFICATION OF INFORMATION (II app	incable).		
I certify that all information provided on any emp	ployment application form, res	sume, or vita is complete	, true and accurate to the best
of my knowledge. I also understand that information may be verified and any misrepresentation of facts may be considered cause for			
dismissal regardless of when discovered by the University.			
CRIMINAL HISTORY CHECK:			
			_
Have you ever been convicted of a felony or misc	lemeanor'?	Yes	0
Are there any felony charges pending against you	2	Yes N	lo.
Are there any reiony charges pending against you		Yes N	10
If yes, list date(s), type of offense(s), circumstant	es, county where conviction of	occurred and action taker	n:
Conviction of a crime will not necessarily render you ineligible for a position (or to volunteer), but the nature of the conviction,			
circumstances and/or time of the occurrence may be considered in processing your application. Criminal conviction will be			
considered in relation to the position for which you have applied.			
I understand that if I am hired, I may be discharged for a	ny misrepresentation or omission in	the above stated informatio	n.
I also understand that any job offer or subsequent employ	ment may be conditioned on the Ur	niversity's receint of a satisfa	ctory Criminal Conviction Report.
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If determined necessary by the University, I authorize a b	ackground check with respect to cr	iminal convictions.	
If a third party agency is used to conduct a criminal history check, the University agrees to comply with the Fair Credit Reporting Act (FCRA).			
REFERENCE CHECK (if applicable):			
	may inquire and verify any inform	nation contained on the an	plication, resume and/or vita as
In accordance with policy and practice the University may inquire and verify any information contained on the application, resume and/or vita as part of the application process. I understand that my current and former employers may release any information contained in my personnel file or			
otherwise known by them to Central Michigan University in connection with my application for employment with Central Michigan University. I			
specifically release from liability any current or former employers, their agents, representatives, employees, officers, or directors, for giving such			
information to Central Michigan University.			
"CMIL is an Equal Opportunity Employer and institution	CMII does not discriminate agains	ot norsons based on age colo	r disability athricity familial status
"CMU is an Equal Opportunity Employer and institution. gender, gender expression, gender identity, genetic inform	nation, height, marital status, nation	al origin, political persuasion	n, pregnancy, childbirth or related
medical conditions, race, religion, sex, sex-based stereoty	pes, sexual orientation, transgender	status, veteran status, or we	ight."
Michigan law requires that a person with a disabi	lity or handican requiring acco	ommodation to perform t	the essential duties of the job
Michigan law requires that a person with a disability or handicap requiring accommodation to perform the essential duties of the job must notify the employer in writing within 182 days from the date that the need is known or should have been known.			
must notify the employer in writing within 102 to			
Signature (First, Middle, Last)	Print (First, Middle, Last)		Date
Department	Supervisor		Date of Birth
Have you ever lived or worked outside of Michig	an? Yes No		
Email:	Campus	ID# (if known)	
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