



Human Resources

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Pre-Employment Release of Information Authorization Form

This authorization or photocopy thereof hereby authorizes the City of St. Joseph, Michigan and/or its authorized representatives to fully investigate, in the manner it deems appropriate, the information contained in my application or regarding my employment history.

This document authorizes all individuals, partnerships, corporations, governments, or other entities to release to the City of St. Joseph, Michigan or its authorized representatives, any and all information, records, or documents whatsoever deemed to be necessary to complete its investigation or my employment history. Said information or documents may concern but are not necessarily limited to my current or past salaries, finances, character, ability, business activities, education background, general reputation, military service (if applicable), criminal conviction record, civil litigation, bankruptcy record, driving record, and former employment history including the reasons for terminations.

All individuals or entities presented with this authorization by the City of St. Joseph, Michigan or its authorized representatives are expressly authorized to permit the City of St. Joseph, Michigan or its authorized representatives to obtain copies of any and all documents or records they request and to surrender possession of such documents to them for copying. I hereby release, waive and discharge any and all claims that I might otherwise possess against any individual or entities whom I have authorized to provide information about me and who have received a copy of this authorization.

Dated this _____ day of _____, 20_____.

Applicant Name Printed

List the cities and states where you have lived and worked in the last seven years.

Date of Birth

City State

Social Security Number

Driver's License Number

Maiden Name or Alias Name

May we contact your present
Employer? Yes: _____ No: _____

Applicant's Signature

