

Criminal History Authorization and Release Form

This form authorizes the University of North Texas to obtain criminal history information on individuals working with minors.

Instructions: This form is to be completed by the applicant. Print legibly and complete all information requested. Deliver completed form to the Risk Management Services office located at 700 North Texas Blvd.

This form must be submitted and the process completed prior to volunteering.

Last Name:	First Name:	Full Middle Name:
Date of Birth: M/DD/YYYY	*SSN:	Name of Program:
Maiden Name:		Circle: Male Female
Current Street Address:	City, State & Zip Code:	Place of Birth: City, State, County
Permanent Street Address:	City, State & Zip Code:	Email Address:

*State law authorizes institutions of higher education to obtain criminal history information on applicants for employment or volunteer engaged with Programs for Minors on the University of North Texas campus. Your SSN will be used to obtain this information as part of a background check. You are not required by law or other authority to disclose your SSN, however, failure to do so may result in the inability to complete the background check. Under Texas Public Information Act, your SSN will not be disclosed to the public.

List all locations where you have lived during the last 7 years, beginning with your present place of residence.

From M/DD/YYYY	To M/DD/YYYY	Street, City, State, Zip Code	County

Acknowledgement and Authorization

I hereby authorize the University of North Texas' (UNT) agent to furnish UNT information related to my criminal history. I hereby release UNT, the UNT System and all its officers, and employees, from all liability resulting from the use of information obtained as part of this background check. I certify that the information provided by me on this form is true, complete and correct to the best of my knowledge. I understand that any false information provided herein will void my application for employment and may result in termination. I further understand that a criminal history may disqualify me for employment or volunteer opportunities at UNT.

The Texas Privacy Act, with a few exceptions, allows you to be informed about the information the University of North Texas collects about you to review and obtain the information on this form and to correct any information you believe is incorrect.

Signature Applicant: _____ **Date:** _____ **Phone #:** _____

RISK MANAGEMENT SERVICES USE ONLY:		
Date Request Received:	Date Request Submitted:	Initials:
Request ID #:	Date Results Communicated:	Adverse Reports: YES NO
Cleared: YES NO	Notes:	