

**SAGINAW VALLEY STATE UNIVERSITY
PRE-EMPLOYMENT CERTIFICATION/RELEASE**

I understand and agree to the fact that employment at Saginaw Valley State University is conditional upon a review of my qualifications, references, etc. I authorize Saginaw Valley State University to request and obtain verification that the information given by me on my application, resume or vita and in this Pre-Employment Certification/Release (hereinafter, "Release") is true, accurate and complete. I further authorize SVSU to update such verification at any time during my employment as may be deemed necessary. I understand that such verification may include but may not be limited to background information pertinent to the position for which I have applied, including my character, reputation, consumer reports, credit reports, verification of licensure, verification of academic records, verification of employment, and investigation of criminal history (collectively referred to as "background information").

I further understand that if I refuse to sign this Release or have given any false information or omitted any pertinent facts on my application, resume, vita or Release, I may be disqualified from employment with Saginaw Valley State University, or, if hired, I may be discharged immediately upon discovery of such false statements or omissions.

I authorize my current and all previous employers, academic institutions and other references to release, on a confidential basis, any background information they may have concerning me, including any information contained in my personnel record, academic record or otherwise known by them to Saginaw Valley State University. I waive my right to prior written notice of disclosure of my personnel record information, including disciplinary reports, letters of reprimand and other disciplinary action by my current and former employer(s) and by Saginaw Valley State University at some point in the future. I specifically release from liability Saginaw Valley State University and any current or former employer, including their agents, representatives, employees, officers or directors for any reasonable act in relation to the requesting or giving any form of background information.

FOR IDENTIFICATION PURPOSES

Please Print Full Name _____

Other or Former Names (maiden) _____

Street Address _____

City _____ State _____ Zip Code _____

Date of Birth: _____ Race _____ Gender _____
 Month Day Year

Social Security # _____ Driver's License State _____ Driver's License # _____

Please list current and previous counties of residence for the past seven (7) years:

County _____, State _____ County _____, State _____

County _____, State _____ County _____, State _____

County _____, State _____ County _____, State _____

County _____, State _____ County _____, State _____

EDUCATIONAL DATA

Highest Degree/Diploma Attained _____ Year Received _____

School/College/University _____ City _____ State _____

Professional License: State _____ Type _____ Number _____

PRIOR EMPLOYER VERIFICATION (Please list your last three [3] employers or last seven [7] years of employment.)

1. Employer Name _____
Employee Title _____
Supervisor Name _____ Telephone # _____
Address _____ City _____ State _____ Zip _____
Start Date _____ End Date _____ Presently Employed? Yes _____ No _____

2. Employer Name _____
Employee Title _____
Supervisor Name _____ Telephone # _____
Address _____ City _____ State _____ Zip _____
Start Date _____ End Date _____ Presently Employed? Yes _____ No _____

3. Employer Name _____
Employee Title _____
Supervisor Name _____ Telephone # _____
Address _____ City _____ State _____ Zip _____
Start Date _____ End Date _____ Presently Employed? Yes _____ No _____

Name of any individual(s) named above or as a reference who should not be contacted _____

Reason you do not want the named individual(s) to be contacted _____

ADDITIONAL INFORMATION

Have you ever been convicted of a felony? Yes _____ No _____ If so, give date, place, charge and disposition:

Are there any pending felony charges against you? Yes _____ No _____ If so, give date, place, charge and status of case:

Have you ever been convicted of a misdemeanor? Yes _____ No _____ If so, give date, place, charge and disposition:

Signature _____ Date _____

Title of Position Applied For: _____

When completed and signed, please fax to Employment & Compensation Services at (989) 964-7066.