

McDowell County Schools
P.O. Box 130
Marion, NC 28752

WAIVER AND RELEASE OF PERSONNEL INFORMATION

I, the undersigned applicant/employee hereby expressly authorizes the McDowell County Board of Education, its agents and its employees to make any investigation of my personal or employment history, expressly including, but not limited to federal and/or state criminal, law enforcement or traffic records, which may include confirmation by fingerprint identification. I further authorize any former employer, person, firm, corporation, credit agency, administrative body, or governmental agency to give to the McDowell County Board of Education, its agents, or employees any information they may have regarding me. In consideration of the review of my employment application by the McDowell County Board of Education, its members, officers, agents, or its employees, I hereby release the McDowell County Board of Education to which this application is submitted and any and all providers of information to whom this release is sent, from any liability as a result of furnishing or receiving this information. If employed, I further authorize the McDowell County Board of Education or its agents to provide information about my employment in this school system to future employers or prospective employers. I authorize persons to whom an exact copy of this release is presented to rely on the copy as if it were a signed original. I also understand that the information below regarding sex, race and date of birth is requested for the sole purpose of gathering the above information correctly, and will not be used to discriminate against me in violation of any law.

I understand that I have the right to make a request of the Consumer Reporting Agency, upon proper identification and the payment of any authorized fees, the information in its files on me at the time of my request. I further authorize ongoing procurement of the above-mentioned reports at any time during my employment (or contract).

FOR IDENTIFICATION PURPOSES: PLEASE PRINT ALL INFORMATION CLEARLY

Last Name: _____ First Name: _____
 Middle Name: _____ Other Names (Maiden, Aliases, etc.): _____
 Date of Birth: Month: _____ Day: _____ Year: _____ Race: _____ Gender: _____
 Social Security #: _____ Driver's License #: _____ State: _____

**LIST ALL ADDRESSES FOR THE PAST SEVEN (7) YEARS
 START WITH YOUR MOST CURRENT ADDRESS**

	<u>Street</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	<u>Dates (MM/Year)</u>
1.	_____	_____	_____	_____	From: _____ To: _____
2.	_____	_____	_____	_____	From: _____ To: _____
3.	_____	_____	_____	_____	From: _____ To: _____
4.	_____	_____	_____	_____	From: _____ To: _____
5.	_____	_____	_____	_____	From: _____ To: _____
6.	_____	_____	_____	_____	From: _____ To: _____
7.	_____	_____	_____	_____	From: _____ To: _____

SIGNATURE: _____ **DATE:** _____