Savannah Technical College

BACKGROUND INVESTIGATION CONSENT

I, _____, hereby authorize ***Savannah Technical College,*** and/or its agents to make an independent investigation of my background, references, character, past employment, education, credit history, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my Application and/or obtaining other information which may be material to my qualifications for employment now and, if applicable, during the tenure of my employment with ***Savannah Technical College.***

I release ***Savannah Technical College*** and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or legal action regarding the information obtained from any and all of the above referenced sources used.

The following is my true and complete legal name and all information contained herein is true and correct to the best of my knowledge:

_____ _____

Please **PRINT** Applicant/Employee Name ** Street Address – (PO Box #'s are not acceptable)

_____ _____ _____ _____

City State Zip Code County

If you have lived at the address listed above for less than 5 years, please list previous address below.

_____ _____

Street Address – (PO Box #'s are not acceptable) City

_____ _____ _____

State Zip Code County

_____-_____-_____ _____

Social Security Number * Date of Birth *

*****NOTE: The above information is required for identification purposes only, and is in no manner used as qualifications for employment. ***Savannah Technical College*** is an Equal Opportunity Employer. APPLICANTS FOR ALL POSITIONS ARE CONSIDERED WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, THE PRESENCE OF A NON-JOB RELATED MEDICAL CONDITION OR HANDICAP, OR ANY OTHER LEGALLY PROTECTED STATUS.

****A photo copy of Applicant/Employees valid Driver's License must accompany this form.**

_____

Applicant/Employee Signature

**********This section to be completed by Administrative Services**********

Results:_____ OK to hire ____ Not OK to hire ____ More information required.

Final Results: _____

Revised 06/01/04