collaborative.org
Collaborative for Educational Services

Reference Check Release Form

In connection with my application for employment, I understand and agree that background inquires may be requested by The Collaborative for Educational Services (CES) that will seek information regarding my professional expertise and job performance. I understand that any information released by my prior employer will be held in the strictest confidence.

I also understand and agree that CES may request information from various federal, state, and other agencies, including public and private sources which maintain records concerning my past activities relating to my driving record, criminal record, civil matters, previous employment, educational background and other past experiences.

I further release and hold harmless CES and any professional references contacted, including, but not limited to those listed on my employment application and those listed below, from any and all liability that may potentially result from the release and/or use of such information.

I acknowledge that a fax or copy of this release shall be as valid as the original.

_____ _____ _____

(Applicant's signature) **(Print name)** **(Date)**

Professional Reference #1: _____ _____ /_____
(Name) (Phone # / Email)

_____
(Title)

Professional Reference #2: _____ _____ /_____
(Name) (Phone # / Email)

_____
(Title)

Professional Reference #3: _____ _____ /_____
(Name) (Phone # / Email)

_____
(Title)

Other Reference: _____ _____ /_____
(Name) (Phone # / Email)

_____
(Relationship)