

Consent to Criminal History Background and Reference Check and Release of All Claims

Office	of	Human	Resources
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Name First	Last		Middle Initial			
Other Names Used(Maiden)						
Date of Birth Age	Male 🗌 Female					
Race: 🗌 White 🔲 Black 🔲 Asian/ Pacific Islander 🔲 American Indian/ Alaskan Native 🗌 Other						
Home Address City	State	Zip	Residing County			
Phone Number	Email address					
Michigan ID or Driver License #						

Provide a Copy of Driver License or State ID with this Form

Acknowledgment and Consent

I hereby authorize Macomb Community College to investigate my background and credentials to the extent permitted by law. I understand that such investigation will include a criminal history background check conducted by the Michigan State Police and a determination of whether I am listed on the Michigan Sex Offender Registry, and I hereby consent thereto. I also understand that such investigation may include discussions with supervisors, co-workers, friends, business associates, or other individuals or entities that Macomb Community College, in its discretion, believes may have relevant information regarding my suitability for employment/volunteer position, and I hereby consent thereto.

I hereby release and forever discharge Macomb Community College, its agents, employees and trustees from any and all claims, demands, damages, actions, causes of action, or suits of any kind or nature whatsoever arising from the Criminal History Background Check and Reference Check. I acknowledge that Macomb Community College has made no representations of any kind as to whether employment/volunteer position will be offered at the conclusion of the investigation of my suitability for employment/volunteer position.

Signature

Date