

Creighton UNIVERSITY

Background Investigation Acknowledgement and Authorization

In connection with my application for employment, I understand that a background investigation will be conducted which will include, but may not be limited to, a combination of the following screenings:

- County Criminal Record Search (Required)
- Alias Name Search (Required)
- Found Wants and Warrants (Required)
- Found Protection Orders (Required)
- Residential History Search (Required)
- Social Security Number Search (Required)
- Federal Criminal Record Search
- Credit Report
- Driving Record
- Education and/or License Verification
- Employment or Personal Reference Check
- Sex Offender Registry
- Office of the Inspector General (OIG) Cumulative Sanction Report (**Required for employees involved in Health Care**)

I authorize Creighton University to conduct the required background investigation used in connection with consideration of my application for employment. I release Creighton University and its partners, officers, directors, agents, employees, affiliates, and its agent **Secured Data Services** from any and all liability for any damages which may arise from or relate to any consumer report and/or investigative consumer report and/or other background investigation requested, obtained or used by Creighton University with my application for employment. **Special note to internal candidates (current employees): The result of this investigation may adversely impact your current employment with the University.**

Section I - Candidate (Please Print)

Name: _____
Last First Middle

Other Names Used: _____

Current Address: _____
Street City State Zip Code

Prior Address: _____
Street City State Zip Code

I understand that if adverse information is revealed, I will be notified in writing by the Human Resources Department. I will have seven business days, from the date on the written notice, to contact the Human Resources Department to discuss the adverse information. I further understand that I must also notify **Secured Data Services** to contest the results of the background check within seven business days from the date of the written notice to me. Failure to complete any part of this process in described time frames will automatically result in disqualification from the hiring process.

If not a citizen, what type of **Employment Eligibility documentation** do you hold?

Signature: _____ Date: _____

Section II - Final Candidate (Not to be completed by candidate until an offer of employment is made)

Date of Birth (Month, Day, Year) Gender Social Security Number

Driver's License Number and State of Issuance (Only if position requires driving record check)