



Department of Human Resources

AUTHORIZATION FOR CRIMINAL BACKGROUND CHECK

TO BE COMPLETED BY THE CANDIDATE/APPLICANT:

DATE: _____

FIRST	GIVEN MIDDLE	MAIDEN	LAST
All other name(s) by which you have been known:			

SOCIAL SECURITY #*	DATE OF BIRTH	SEX	RACE	DRIVERS LICENSE #

*Your social security number is being requested for the University to conduct a residence history and criminal conviction background check consistent with University policy. You are not required to disclose your social security number; however, if you do not disclose your social security number you will not be considered for employment.

CURRENT APPLICANT RESIDENCE (Street, City, State, Zip):	
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PERMANENT APPLICANT RESIDENCE (Street, City, State, Zip):	
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POSITION APPLIED FOR:	
DEPARTMENT AND DIVISION:	
<input type="checkbox"/> EXEMPT FROM PERSONNEL ACT (EPA)	<input type="checkbox"/> SUBJECT TO PERSONNEL ACT (SPA)
<input type="checkbox"/> PERMANENT HIRE	<input type="checkbox"/> TEMPORARY HIRE

- YES NO Are you currently an employee of North Carolina Central University?
- YES NO Have you ever lived or worked outside of Durham, North Carolina? If yes, complete page 2 of this form.
- YES NO Have you ever been convicted of any unlawful offense, other than a minor traffic violation? If yes, list below the date, state, and the conviction and crime for which you were indicted. Prayers for Judgment Continued (PJC)s and non-contested charges must be included, unless you have acted to expunge your record. If more space is needed, **check here** and attach additional pages.

DATE	LOCATION (County and State)	CONVICTION AND CRIME

TO BE COMPLETED BY THE CANDIDATE/APPLICANT:

FIRST	GIVEN MIDDLE	LAST	SOCIAL SECURITY #

If you have lived or worked outside of North Carolina, please list the states, dates lived or worked in the locations, cities, counties and the name(s) used during the reported periods.

STATE	DATES (From: Yr To: Yr)	CITY	COUNTY	NAME(s) USED (If different from above)

I hereby certify that all information provided on this Authorization is true and complete to the best of my knowledge and belief. I understand that any misrepresentation or false statement made within the application or related documents which are deemed relevant material may result in North Carolina Central University not hiring or terminating my employment. I understand that electronic submission of my Authorization establishes my consent to the University’s verification of all information contained in this Authorization, including obtaining a consumer report for the purpose of employment from a Consumer Reporting Agency. I understand that by admitting to a conviction for any unlawful offense, I will not be automatically disqualified from consideration for employment with NCCU. I also understand that false or misleading information or documentation, or an omission, or the failure to include and disclose all relevant information will result in rejection of my application. Action leading up to and including termination of employment and/or criminal prosecution can occur. If hired, I understand the University complies with State law and will be required to terminate me if false or misleading information is given in order to meet the requirements for the position.

Candidate/Applicant Signature _____
Date

Submit Completed Forms To:

Employment Coordinator
 North Carolina Central University
 P.O. Box 19714
 Durham, NC 27707