

Westminster Woods Camp & Retreat Center, Inc.

Release of Information & Authorization Form

Have you ever been convicted of a felony, a crime involving moral turpitude, truth and/or veracity, or a crime with a juvenile as a victim? _____ **No** _____ **Yes**

If yes, please explain: (or you may attach a letter)

Conviction of a crime is not an automatic bar to employment. The WMW will consider the nature of the offense, the date of the offense, and the relationship between the offense and the position for which you are applying.

Do you understand that should you be offered a position of employment that you will be required to submit to a complete physical examination at your cost? ____ **Yes** ____ **No**

I hereby certify that the statements made by me in this application and all related information which I have provided are true, accurate, and complete to the best of my knowledge. I understand that if I provide any false, inaccurate or incomplete information, I will not be eligible for employment, or, if I am hired, I may be terminated regardless of the date on which the WMW discovers the false, inaccurate or incomplete.

I authorize investigation by the WMW of all statements contained in this application. I specifically authorize the WMW to conduct a background investigation of personal, employment, educational, military, and criminal conviction records or history. I also grant permission to the PSK to contact all references listed herein.

I expressly authorize the release to the WMW of any records or information which may refer or relate to this application for employment, including, but not limited to, records of educational institutions, law enforcement or criminal justice agencies, agencies maintaining child abuse records, and previous employers. I hereby release and discharge the WMW and any other person, firm, agency or corporation related thereto from any and all claims and liability which I may have or ever claim to have relating to information provided to the WMW as part of this application for employment.

Agree _____ Disagree _____ Date _____

Signature _____

Print Legal Last Name

Legal First Name

Legal Middle

Other Names Used

DOB _____ SS# _____
(MM/DD/YEAR) (000-00-0000)