



## Credential Verification Authorization Statement

Dawson Community College has an obligation to students and taxpayers to employ those who will maintain the quality of its services and whose contacts with the public will maintain public confidence.

I declare that any statement in this application or information provided is true and complete. False information may be grounds for rejecting this application or for dismissal following employment. I authorize the College and any agent acting on its behalf to conduct investigations to verify the accuracy of the information provided, including prior employment history and educational experience. These investigations may include a criminal background check (both state and federal).

Moreover, I release the employer and any agent acting on its behalf from any and all liability of whatsoever nature by reason of requesting such information from any person.

Yes \_\_\_\_\_

No \_\_\_\_\_ *(we may be unable to hire you without this information)*

By entering my name below, I hereby acknowledge that I have read and understand the information above.

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**Signature**

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**Date**