



St. Joseph Convent
 526 Mill Street
 Campbellsport, WI 53010
 HR Phone: (920) 533-1135
 HR Fax: (920) 533-1149

EDUCATION VERIFICATION, AUTHORIZATION, AND RELEASE STATEMENT

I certify that the information provided by me in this application is true and complete to the best of my knowledge. I understand that if I am employed, any false statements or omissions can lead to immediate dismissal, and I agree that the company shall not be held liable in any respect if my employment is terminated for that reason. You are hereby authorized to verify the information I have supplied and to conduct any investigation of my personal history and/or credit and financial records, employing investigative or credit agencies or bureaus of your choice subject to the provisions of the Fair Credit Reporting Act. I understand that, within a reasonable period, I may make a written request for detailed information concerning such investigation. I authorize the companies, schools, and persons named below to give any information requested regarding my employment, character, and qualifications, and release and hold harmless (employer) and the companies, schools, and persons from any liability. I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time without prior notice and without cause. I further understand that any offer of employment may be conditioned upon the results of a physical examination.

Today's Date: _____ Applicant Name: _____

Position Applied For: _____ Expected/Date of Graduation: _____

School Name and Street Address: _____

School City, State, Zip: _____

School Phone Number: _____ School Fax Number: _____

Teacher/Professor Name: _____ Applicant's Signature: _____

Dear School Personnel:

The individual named above has applied for a position with us and indicates attendance at your school. Your cooperation in supplying the information requested below will be greatly appreciated. After completing the form it can be returned to the fax number above. All details will be kept in confidence and will be used only to determine suitability for employment. Thank you,

Attendance Dates: _____

Expected/Date of Graduation: _____

Would you recommend for hire? Yes No

If no, why not? _____

Comments _____

Please evaluate the student's performance by completing this table.

	Excellent	Good	Fair	Poor
Attendance				
Promptness				
Quality of Work				
Effort				
Honesty				
Attitude				

Signature: _____ Title: _____ Date: _____