AUTHORIZATION TO CONTACT EMPLOYMENT REFERENCES

Name of Applicant _____

Address _____ City _____ State _____ Zip _____

Telephone _____

I hereby authorize the _____ School Corporation to contact any references whose names I have submitted to discuss my willingness and ability to perform the job for which I am applying. I also release this School Corporation and any of the persons providing information from any liability or legal claims for making such contact or from using or providing any of the information obtained.

_____
Signature

_____
Date

_____
Witness

_____
Date