



CRIMINAL HISTORY AND BACKGROUND CHECK

THE CITY OF MT. VERNON, ILLINOIS MAY OBTAIN YOUR EMPLOYMENT RECORDS, HISTORY AND INFORMATION, INCLUDING PERSONNEL FILES, AND A CRIMINAL HISTORY AND BACKGROUND CHECK FOR EMPLOYMENT PURPOSES.

AUTHORIZATION AND RELEASE

The undersigned hereby acknowledges and understands that the **City of Mt. Vernon** may procure information regarding my employment records, employment history and employment information, including personnel files, and a criminal history and background check. In connection with my application for employment with the **City of Mt. Vernon, Illinois**, I authorize the procurement of a pre-employment screening report and understand that it may contain information about my background, character, general reputation, mode of living, criminal history, driving record, educational background, and job performance. I understand that, upon written request within a reasonable period, I am entitled to additional information concerning the nature and scope of this pre-employment screening. I hereby release the **City of Mt. Vernon**, its officers, agents, employees, and servants from any liability arising from the preparation of this report or pre-employment screenings relating thereto.

The undersigned hereby authorizes the **City of Mt. Vernon** to request and to obtain any or all of the information described within the immediately preceding paragraph to be used for employment purposes.

As a condition for an applicant to be considered for a position with the **City of Mt. Vernon**, applicants must understand and agree to submit to fingerprinting if requested. The undersigned hereby give permission to the **City of Mt. Vernon** to obtain my fingerprints and use my fingerprints to procure a criminal history and background check. I agree to provide my fingerprints upon request.

This authorization for release of information includes, but is not limited to matters of opinion relating to my character, ability, reputation, and past performance. I authorize all persons, schools, companies, corporations, and law enforcement agencies to release such information without restriction or qualifications to the **City of Mt. Vernon**, and any of their officers, agents, employees and servants I voluntarily waive all recourse and release them from liability from complying with this authorization.

The undersigned hereby releases the **City of Mt. Vernon** and any person who provides the foregoing information to the **City of Mt. Vernon** from any liability and damage of whatsoever nature or type because of furnishing the information described above.

Job applicants are not obligated to disclose sealed or expunged records of conviction or arrests (IL Public Act 093-0211). Any omission or untrue statements not in accordance with IL Public Act 093-0211 will be grounds for rejection or termination.

I authorize that a photocopy of this release will be considered as valid as the original.

Date: _____

Signature

Drivers License Number

Social Security Number