APPLICANT'S AUTHORIZATION TO RELEASE INFORMATION

I

hereby autho information ab	int for a position with I rize past employer and educational institutions to release out my work history and education history for use to determine my or this position.
You may relea	se or verify the following items:
() Any information requested.
Past Employer	s:
() Salary History
() Dates of Employment
() Positions Held
() Duties and Responsibilities
() Attendance Record
() Reason for Leaving
() Eligibility for Rehire
Education Inst	itutions:
() Years of Attendance
() Degree Obtained
() Transcript
Signature	 Date
Print Name	