

**EMPLOYMENT VERIFICATION  
AUTHORIZATION AND RELEASE FORM**

I authorize the Corporation of the Catholic Archbishop of Seattle (CCAS) to release information about my employment record at CCAS. I understand that such information may include, but is not necessarily limited to, evaluations of my work, my job performance, interpersonal skills, salary history, reasons for separation, and any other information about my employment history available to CCAS.

I hereby waive any claims against CCAS and release CCAS from any liability to me arising from CCAS's providing such information to my prospective employers.

I understand that I have the right not to sign this Authorization and Release form, in which case CCAS may choose to release only my dates of employment and my last position held to prospective employers and to decline further comment.

\_\_\_\_\_ I hereby authorize my supervisor and/or the Office of Human Resources to release information regarding my employment with the Archdiocese of Seattle to prospective employers.

\_\_\_\_\_ I authorize verification of my position title and dates of employment only.

\_\_\_\_\_ Other (please specify): \_\_\_\_\_

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witnessed by (HR or Supervisor)

\_\_\_\_\_  
Date