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Effective Date: **January 16, 2023**

**RESOURCE**

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**EMPLOYMENT**

# **Appendix B – Authorization to Release Information**

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[This document is an Appendix to the [Sexual Misconduct Hiring Disclosure Policy](#)]

(A separate authorization should be completed for the final candidate's current employer and any employer who employed the final candidate in the last seven years)

I authorize the release of information (described below) requested by BU concerning any substantiated finding of sexual misconduct related to my professional record. I understand BU will only request the information authorized by this release after I have accepted a conditional offer of employment as an [insert title/position]. BU agrees to maintain the confidentiality of any information received on a need to know basis. This signed form authorizes [name of employer] to share that information with BU.

## Requested Information

If, in the past seven years, I have been found responsible for violating [name of employer]'s

policies prohibiting sexual misconduct, including sexual harassment, sexual assault, and/or other forms of sexual misconduct, that I retaliated against anyone who made such a complaint or cooperated or participated in the investigation of such a complaint, this signed form allows my current or previous employer(s) to disclose that information. Specifically included in this authorization are statements made by me and any and all reports of any investigation, formal or informal, about such complaints, as well as records and information regarding any factual or legal findings regarding such complaints and any disciplinary or other corrective action imposed after such investigations, as well and any and all agreements settling or otherwise resolving claims, demands or lawsuits involving allegations of such misconduct by me, including allegations that I did not properly respond to complaints against others who reported to me as employee or student.

This authorization includes release of information of a confidential or privileged nature, or any data or materials which have been sealed or agreed to be withheld pursuant to any prior agreement or court proceeding involving disciplinary matters. If an employer provides information on a substantiated finding of sexual misconduct, I will be notified and permitted to provide information in response.

I hereby release, discharge, and exonerate (1) BU, its employees, agents and representatives and (2) any employer or person furnishing information to BU, from any and all liability of every nature and kind arising out of the furnishing and inspection of such documents, records and other information, whether communicated in writing or verbally. This release shall be binding on my legal representatives and successors.

This authorization is valid for 1 year from the date of my signature. A photocopy of this release is to be considered as valid as an original.

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

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END OF POLICY TEXT

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Categories: Employment, Sexual Misconduct Keywords: background check, employee hiring, form, hiring, release