

University of Delaware

Juvenile Criminal Background Check Consent Form

I, _____ give full consent for the University of Delaware and Acxiom Inc, its vendor, to conduct a Criminal Background Check on _____. I understand that by giving this consent, any information obtained as a result of this Criminal Background Check will be used to determine employment eligibility with the University of Delaware. I further understand that any information obtained from the Criminal Background Check will be strictly confidential, and that the refusal to submit to a Criminal Background Check will be treated as a withdrawal of the applicant's request for employment.

Applicant Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____