

## Employee Information Release Consent

I, , hereby authorize [Company Name] to release my employment and/or personal information as requested by:

Recipient Name/Organization:

Purpose of Information Release:

Type(s) of Information to be Released:

☐ Employment Status

☐ Salary Information

☐ Dates Employed

☐ Position(s) Held

☐ Other (please specify):

This consent is valid from  to .

Employee Signature:

Date: