

Student Employment Criminal Background Check (CBC) Authorization Form

Criminal background checks may be completed for student jobs as appropriate but are only required for specific job titles. Human Resources will complete a criminal record search upon receiving a completed and signed copy of this form. Please allow a minimum of five business days for processing of each background check request.

Completed forms can be submitted in the following ways: Email: cbc@hr.msu.edu.or Mail: MSU Human Resources, 1407 S. Harrison Rd, Suite 110, East Lansing, MI 48823

| Section 1. MSU Unit Information Hiring Department: | (Please Type o | or Print Legib | ly) | Stude | nt Employee Start D | ate: | |
|--|---------------------------------|-----------------|----------------|----------------|----------------------|--------------------------------------|--|
| | | | | | | | |
| Department Contact Name: Phone Nu | | mber: | | Email Address: | | | |
| Section 2. Student Employee Info | rmation (Pleas | se Type or Prii | nt Legibly) | 1 | | | |
| Last Name/Surname: | ast Name/Surname: First Name/Gi | | | Middle Name: | | | |
| List any aliases and/or other legal | names: | | | 1 | | | |
| | | | MSU NetID |) : | | | |
| Date of Birth (mm/dd/yyyy): | | Male | Female | | MSU Student: | □Yes □ No | |
| Local Address (Street): | | City: | | | State: | Zip: | |
| Cell/Local Phone Number (with Area Code): | | Email Address: | | | | | |
| | | CRIMINAL | HISTORY | | | | |
| NOTE: A "yes" re | | | | n indivi | dual from consider | ration. | |
| the offense, and the legal disposition of the understand that Michigan State Ur | iversity conduc | | • | | | ¥ • | |
| and that information obtained as a roof employment with Michigan State background check has been completed | University. I un | • | | | | | |
| I authorize Michigan State University I authorize I authorize Michigan State University I authorize Michigan State I authorize Michigan I au | | esources to cor | iduct a crimin | al backg | ground check on me | and disclose | |
| Applicant's or Legal Guardian's Signature: | | | Date: | | | | |
| MS | U IS AN AFFIRMA | TIVE ACTION/EQ | QUAL OPPORTU | UNITY EM | MPLOYER | | |
| | MSU : | HR OFFIC | E USE O | NLY | | | |
| Date Form Received: | Form Received:Date CBC | | Date | | Department Informed: | | |
| MSU HR Staff Name and Signature | : | | | | | | |
| [CHAT Record: ☐Yes ☐ No | OTIS Record: | □Yes □ No | NSOPW I | Record: | ☐Yes ☐ No Eli | igible: \(\text{Yes} \(\text{N} \) | |