ATTACHMENT F

Form Release to be Signed by Persons Concerning Whom References Will be Contacted:

To whom it may concern:

I have applied for employment with Appalachian State University (the "University"), and I have authorized the University to obtain from my current and former employers, colleagues, and educational institutions I have attended, information that might bear on my qualifications and fitness for employment. Such information might include information on (but would not be limited to) quality of work, relationships with co-workers and supervisors, work attitude, productivity, and trustworthiness.

I hereby request and authorize you, as a current or former employer, colleague, or educational institution, or as an agent or employee of a current or former employer, or educational institution, to provide to the University, in writing or orally, all such information about me as the University may request, and I release the University and you from and hold you and the University harmless for any and all liability arising out of or related to the provision or the University’s use of such information. Further, I authorize the University to maintain as confidential any letter of reference you may provide and any notes of your oral statements of reference. Finally, I irrevocably waive any right I might have, pursuant to law or otherwise, to review or to be apprised of the contents of such references, written or oral.

______________________________
Printed Name

______________________________
Signature

______________________________
Date