



Restoring Dignity, Inspiring Change

**Reference Check Consent**

I authorize ICMC to conduct a reference check with my present and/or previous employer(s).

I further authorize ICMC to obtain feedback and references from my supervisors as a candidate for \_\_\_\_\_(title of the position). I understand that my successful consideration for this position may be subject to this feedback.

I authorize my former or current employers and references to release information regarding my employment record with their organizations and to provide any additional information that may be necessary for my application for the position with ICMC/ \_\_\_\_\_ (name of the ICMC office).

I expressly agree that ICMC collects and manages the information that I provide for recruitment purposes and in this context only.

Once you submit your application, you will not be able to modify it. If you want to rectify any inaccurate or incomplete information, please send an email to [recruitment@icmc.net](mailto:recruitment@icmc.net).

*Your application will be treated with strict confidentiality.*

Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Date: \_\_\_\_\_