

Signature of Applicant

<u>Application for Employment with McMaster University:</u> <u>External Reference Checks</u>

As part of my application for employment, I authorize McMaster University to contact any or all of the referees I have provided below for the purposes of assessing and verifying my qualifications for any employment opportunity that may be available at the University. I acknowledge that certain of my personal information will be collected by the University from the named referees.

Name of Referee	Title and Organization	Phone Number
The personal information on this form and that collected from the referees is collected under the authority of the <i>McMaster University Act</i> , 1976. The information is used for the academic, administrative, employment-related, financial and/or statistical purposes of the University including, but not limited to, admissions; registration and maintaining records; awards and scholarships; convocation; provision of student services, including access to information systems; alumni relations; and disclosure to or on behalf of the applicable McMaster student government. This information is protected and is being collected pursuant to section 39(2) and section 42 of the <i>Freedom of Information and Protection of Privacy Act</i> of Ontario (RSO 1990). Questions regarding the collection or use of this personal information should be directed to the University Secretary, University Hall, Room 210, McMaster University. I have read and understood the foregoing information, and authorize McMaster University to use the information collected for the purposes as outlined above.		
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Name of Applicant		

Date Signed