

**FLORIDA ATLANTIC UNIVERSITY
HUMAN RESOURCES
RECRUITMENTS SERVICES**

PARENT/LEGAL GUARDIAN CONSENT FORM

FAU College/Department Information:

College/Department requesting the background check: _____

Name of College/Department Contact: _____

Contact Email: _____ Contact Phone Number: _____

Dear Parent or Legal Guardian,

_____ (a minor) is applying for employment or a volunteer assignment with Florida Atlantic University. The employment/volunteer process includes a criminal background check through a third-party company.

If you need additional information on the employment or volunteer assignment, please contact the FAU College/Department listed above.

If you CONSENT the background check for the minor listed above, please sign, and return this form to the College/Department noted above.

Signature of Parent or Legal Guardian consenting to the background check

Print Name of Parent or Legal Guardian consenting to the background check

Please list your relationship to the Minor

Signature of Minor Applying for Employment or Volunteer Assignment

Date: _____