



Verification of Degree(s) and/or Licensure Release Form

Privacy Notice: State law requires that you be informed that you are entitled to: (1) request to be informed about the information collected about yourself on this form (with a few exceptions as provided by law); (2) receive and review that information; and (3) have the information corrected at no charge. To request this information, contact jobs@tamu.edu or (979) 845-5154.

INSTRUCTIONS TO THE HIRING DEPARTMENT: This form is used by Human Resources as authorization to obtain verification of degree(s) and/or licensure on the applicant/employee, as specified below.

- 1) Hiring department completes section 1.
- 2) Applicant/employee completes section 2 (including the signature).
- 3) The form will automatically route to Human Resources to request verification.

SECTION 1: TO BE COMPLETED BY THE HIRING DEPARTMENT OR RECRUITING PARTNER:

Hiring Department/College		Department Contact Name	
Hiring Supervisor		Department Contact Email	
Reclassification <input type="checkbox"/> Yes <input type="checkbox"/> No	Internal Promotion and Transfer <input type="checkbox"/> Yes <input type="checkbox"/> No	New Hire <input type="checkbox"/> Yes <input type="checkbox"/> No	
Job Requisition Title		Requisition #	

SECTION 2: TO BE COMPLETED BY THE APPLICANT/EMPLOYEE:

Last Name		First Name		Middle Name
Social Security Number		Phone Number	Date of Birth (MM/DD/YYYY)	<input type="checkbox"/> Male <input type="checkbox"/> Female

1 st Degree/License		
Degree/License	Major/Field	Date Conferred (MM/DD/YYYY)
Name/Location of institution/entity granting degree/license		
Your Name while at institution (if different than above)		

2 nd Degree/License		
Degree/License	Major/Field	Date Conferred (MM/DD/YYYY)
Name/Location of institution/entity granting degree/license		
Your Name while at institution (if different than above)		



Division of Human Resources
& Organizational Effectiveness

3 rd Degree/License		
Degree/License	Major/Field	Date Conferred (MM/DD/YYYY)
Name/Location of institution/entity granting degree/license		
Your Name while at institution (if different than above)		

4 th Degree/License		
Degree/License	Major/Field	Date Conferred (MM/DD/YYYY)
Name/Location of institution/entity granting degree/license		
Your Name while at institution (if different than above)		

Applicant Signature

Date

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NEED HELP?
Recruitment & Workforce Planning
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