



### Reference Check Consent and Authorization Form

My signature below authorizes SAIF Corporation to release information regarding my employment record with the corporation and to include, but not be limited to, the following:

1. Dates of employment
2. Position(s) held
3. Salary
4. Performance
5. Reason for termination
6. Eligibility for rehire
7. Education and certifications
8. Any other information requested and provided in good faith

I knowingly and voluntarily release SAIF Corporation from any and all liability arising from their giving or receiving information about my employment history, my education or qualifications and my suitability for employment with another organization, whether the information is positive or negative.

If I wish to revoke this authorization, it is my responsibility to email [jobs@saif.com](mailto:jobs@saif.com) and request that it be removed from the Reference Release SharePoint file.

By using an electronic signature, I am authorizing SAIF to provide prospective inquirers information about my employment with the company.

---

Employee Signature (type name)                      Date