**Authorization to Obtain and Release Information**

I authorize Baker Resources Coalition, including Coalition members, for which I have completed this employment application to check my references, to obtain information from my prior employers, to take actions to follow up any information provided in my employment application, and to generally obtain information relevant to evaluating my qualifications and fitness for the position for which I have applied. I also authorize my listed references, past employers, and anyone else who has information about my work history, education qualification, or fitness to provide information to the Baker Resources Coalition and its members. I release Baker Resources Coalition, and its members, and all persons providing information to the Baker Resources Coalition from any liability whatsoever related to obtaining and providing information relevant to this application, regardless of the results.

Signature of applicant ­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of parent/guardian if applicant is under 18 years old approves submission of this application.

Signature of parent/guardian ­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_