



**Information Release
And
Waiver Agreement**

I, _____ hereby authorize
and request Pace University to provide any and all information regarding my employment to

In consideration of your honoring my request, I agree to release from liability Pace University, its directors, officers, employees and agents, and all persons from, and hold it harmless against, any and all claims of whatever nature that I might have now or in the future as a result of the University providing such information.

Name _____

Pace ID # _____

Signature _____

Date _____

