



**Information Release  
And  
Waiver Agreement**

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

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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 \_\_\_\_\_

