

Person of Interest (POI)

AUTHORIZATION FOR SECURITY BACKGROUND AND SANCTION CHECK

Notice About Information Laws and Practices

With few exceptions, you are entitled on your request to be informed about the information The University of Texas System collects about you. Under Sections 552.021 and 552.023 of the Texas Government Code, you are entitled to receive and review the information. Under Section 559.004 of the Texas Government Code, you are entitled to have U. T. System correct information about you that is held by us and is incorrect, in accordance with the procedures set forth in The University of Texas System Business Procedures Memorandum 32. The information that U. T. System collects will be retained and maintained as required by Texas records retention laws (Section 441.180 et seq. of the Texas Government Code) and rules. Different types of information are kept for different periods of time.

A. THIS SECTION IS TO BE COMPLETED BY THE DEPARTMENT.

THE DEPARTMENT MUST COMPLETE THIS AUTHORIZATION FORM ON ALL POI APPOINTMENTS PRIOR TO SUBMISSION OF THE HCM POI REQUEST FORM. DEPARTMENTS ARE RESPONSIBLE FOR BOTH ENSURING THE POI SIGNATURE IS OBTAINED AND MAINTENANCE OF THE FORM AS REQUIRED BY TEXAS RECORD RETENTION LAWS.

Department Name: _____ Contact Person: _____

Department Phone Number: _____ Authorized Signature for Department: _____

B. THIS SECTION IS TO BE COMPLETED BY THE POI CANDIDATE

Falsification of any information on this form will void your application for Person of Interest Appointment and any actions based on it. The information submitted by you is the property of The University of Texas Health Science Center.

Name: LAST _____ FIRST _____ MIDDLE _____

List any former names used: _____

Driver's License No. & State: _____ Date of Birth: _____

Out of State Address and Dates of Residency for the Past Ten Years (attach sheet if necessary):

I hereby authorize any law enforcement agency to furnish The University of Texas or its agent information related to my criminal history. I hereby release UT System and all its agents and employees, the law enforcement agency and all employees of law enforcement agencies furnishing information, from all liability resulting from the furnishing of this information to the UT System. I certify that the statements made by me on this form are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that any false statements made herein will void my Application for appointment of Person of Interest and any actions based on it. I further understand that completion of this form and the security background and sanction check does not constitute an offer of appointment.

SIGNATURE _____

DATE _____

INSTRUCTIONS FOR THE AUTHORIZATION FOR SECURITY BACKGROUND AND SANCTION CHECK

POLICY

In accordance with The University of Texas Health Science Center at San Antonio policy (HOP section 4.3.8), All POI appointments for Health Science Center must undergo a criminal background check and a sanction check before an appointment offer is made and before the Person of Interest can begin to work.* Criminal background and sanction checks will be conducted as part of the selection process and must be completed before the appointment offer to the candidate is made. Current UTHSCSA employees applying for POI appointments at the Health Science Center are not required to undergo a background or sanction check.

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PROCEDURES

For Person of Interest:

1. The authorization form must be completed by the department (section A) and the POI candidate (section B) to authorize the background security check and the sanction check.
2. The authorization form should be retained by the department.
3. Human Resources will enter the data into the HCM, which will generate a confirmation e-mail to the appointing department

TO AVOID ANY DELAYS IN THE APPOINTMENT PROCESS, DEPARTMENTS MUST ENSURE THAT THE AUTHORIZATION FORM IS COMPLETED PRIOR TO THE APPOINTMENT OFFER.