



THE UNIVERSITY OF TEXAS AT AUSTIN
SECURITY SENSITIVE FORM

PO-13
Rev. 03/05
EM150

Human Resource Services
Recruiting and Staffing Services
Campus Mail: NOA, J5600
US Mail: P.O. Drawer V
Austin, TX 78713-8922
Phone: 512-471-6840 • Fax: 512-475-6883

THIS SECTION TO BE COMPLETED BY THE APPLICANT FOR A SECURITY SENSITIVE POSITION

IMPORTANT INSTRUCTIONS: Clearly print all information. Provide ALL information requested. Information is used for identification purposes only. Falsification of any information on this form will void your Application for Employment and any actions based on it.

Name: LAST FIRST MIDDLE Social Security No.: IS THIS A TEMPORARY NUMBER ASSIGNED BY PAYROLL? Y / N

Maiden Name (if applicable): UT EID:

Present Address: NUMBER AND STREET CITY STATE ZIP

Previous Address: NUMBER AND STREET CITY STATE ZIP

Drivers License No./State: Race: Sex: Date of Birth: MONTH/DAY/YEAR

NON-DISCLOSURE AGREEMENT

I hereby authorize The University of Texas at Austin Police Department, the City of Austin Police Department, or any other law enforcement agency to furnish to The University of Texas at Austin my criminal conviction record for a deferred adjudication, misdemeanor, or felony offense at age 17 or older. I do hereby release all agents, servants, and employees of The University of Texas, the person in charge of such law enforcement agency or department and all members of such law enforcement agency or department from all liability resulting from the furnishing of this information to The University of Texas at Austin.

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 Employment and any actions based on it.

SIGNATURE OF APPLICANT DATE

THIS SECTION TO BE COMPLETED BY THE DEPARTMENT WITH A SECURITY SENSITIVE POSITION

IMPORTANT INSTRUCTIONS: Send this completed form to Human Resource Services, Recruiting and Staffing Services, at the above address. For an applicant with an Online Employment Application, send only the completed form. For those applicants with a PO-14 application, please attach the original PO-14 to this completed form. The Department Account Number specified below will be charged for processing this request. Sub-accounts ending between 50 and 59 should be used.

Job Title: Recruiting Job Number (if applicable):

Department Name AND Hiring Unit Code: Department Account Number:

Department Contact's Name: Department Contact UT-EID's (3 max):

Department Contact's Phone Number: Authorized Signature For Department:

For HRS Use Only: S: Date: Initials: C: Date: Initials:

The Texas Public Information Act, with a few exceptions, gives you the right to be informed about the information that The University of Texas at Austin collects about you. It also gives you the right to request a copy of that information, and to have The University correct any of that information that is wrong. You may request to receive and review any of that information, or request corrections to it, by contacting the University's Public Information Officer, Office of Financial Affairs, PO Box 8179, Austin, Texas, 78713 (email:cfo@www.utexas.edu).

Disclosure of your Social Security Number ("SSN") is required of you in order for The University of Texas at Austin to complete an identity verification during the criminal background check, as mandated by Texas Government Code §§ 411.094, 411.086. Further disclosure of your SSN is governed by the Public Information Act (Chapter 552 of the Texas Government Code) and other applicable law.