

# MINOR'S PARENTAL RELEASE FOR EMPLOYMENT

With few exceptions, you have the right to request, receive, review and correct information about yourself collected using this form.

**PURPOSE:** In accordance with A&M System Policy [31.01.02 Fair Labor Standards](#), this waiver form is required when there is any reason to believe the person is a minor and to comply with FLSA age restrictions.

**INSTRUCTIONS:** Age 17 - Complete the following documents and email to [employment@tamucc.edu](mailto:employment@tamucc.edu): Minor's Parental Release, Criminal Background Authorization and proof of age documentation such as a Birth Certificate.

Age 14 to 16 - The university is required to contact the Texas Workforce Commission. A Birth Certificate and recent photograph are also required.

## Minor

|                                 |                 |
|---------------------------------|-----------------|
| MINOR NAME (Last, First Middle) | JOB TITLE       |
| EMPLOYING DEPARTMENT            | NAME OF MANAGER |

## Parental Release

State of Texas, County of Nueces

I/We, \_\_\_\_\_ and \_\_\_\_\_  
*Parent or legal guardian name (please print)* *Parent or legal guardian name (please print)*  
of \_\_\_\_\_, Texas, being the parent(s) or legal guardian(s)  
*County name*  
and also having the legal custody of \_\_\_\_\_ born on \_\_\_\_\_  
*Minor name (please print)* *Minor birth date*  
do hereby give my/our full and unconditional consent for \_\_\_\_\_ to  
*Minor name*  
accept employment as \_\_\_\_\_ and receive compensation from  
*Position (please print)*  
the Texas A&M University System. Any changes to Minor's position must be approved again in writing. I/We hereby release and waive all liability accruing because of his/her accepting employment while he/she is a minor and authorize any emergency medical treatment as needed.

## SIGNATURES

Email to [employment@tamucc.edu](mailto:employment@tamucc.edu) along with other required documentation.

(1) \_\_\_\_\_ (2) \_\_\_\_\_  
*Parent or Legal Guardian* *Date* *Parent or Legal Guardian (as necessary)* *Date*

# CRIMINAL BACKGROUND CHECK AUTHORIZATION

With few exceptions, you have the right to request, receive, review and correct information about yourself collected using this form.



**An Equal Opportunity Employer:** Texas A&M University-Corpus Christi does not discriminate on any basis prohibited by applicable law including race, color, religion, sex, national origin, disability, age, citizenship status, or veteran's status in recruitment, employment, promotion, compensation, benefits or training. The information on this form is the property of Texas A&M University-Corpus Christi.

## TO BE COMPLETED BY APPLICANT, EMPLOYEE, VOLUNTEER OR CONTRACTOR

|                                                                 |        |                                       |                                       |  |
|-----------------------------------------------------------------|--------|---------------------------------------|---------------------------------------|--|
| NAME AS IT APPEARS ON SOCIAL SECURITY CARD (Last, First Middle) |        |                                       | UIN / SOCIAL SECURITY NUMBER          |  |
| Former names used, including Maiden Name                        |        | RESIDENCE ADDRESS (Number and Street) |                                       |  |
| CITY                                                            | STATE  | ZIP                                   | EMAIL ADDRESS                         |  |
| TELEPHONE NUMBER                                                |        | CITIZENSHIP                           | NATIONALITY                           |  |
| RACE                                                            | GENDER | DATE OF BIRTH                         | DRIVER LICENSE NUMBER & ISSUING STATE |  |

|                          |                                    |                             |
|--------------------------|------------------------------------|-----------------------------|
| ANTICIPATED DATE OF HIRE | JOB TITLE OF POSITION I AM SEEKING | NAME OF PERSON HIRING ME    |
| DEPARTMENT NAME          |                                    | PROGRAM NAME, as applicable |

## RESIDENCY INFORMATION

List all places of residence since the age of 18. Attach extra pages if needed.

|      |       |        |         |
|------|-------|--------|---------|
| CITY | STATE | COUNTY | COUNTRY |
| CITY | STATE | COUNTY | COUNTRY |

## CONVICTION RECORD - Attach additional pages as necessary

|                                                                                                                         |     |    |
|-------------------------------------------------------------------------------------------------------------------------|-----|----|
| Have you ever been <u>convicted or pled guilty</u> before a court for any federal, state or municipal criminal offense? | Yes | No |
| Have you ever received <u>deferred adjudication or similar disposition</u> for any federal, state or municipal offense? | Yes | No |
| Have you ever received <u>pretrial diversion or similar disposition</u> for any federal, state or municipal offense?    | Yes | No |
| Have you ever received <u>probation or community supervision</u> for any federal, state or municipal offense?           | Yes | No |
| Have you been convicted of any criminal offense in a country <u>outside the jurisdiction of the U.S.</u> ?              | Yes | No |
| As of the date of this consent form, do you have any <u>pending charges</u> against you?                                | Yes | No |

If you answered yes to any of the questions above, provide details below. Attach extra pages if needed.

| STATE | COUNTY | DATE OF OFFENSE | DETAILS |
|-------|--------|-----------------|---------|
|       |        |                 |         |
|       |        |                 |         |

## ACKNOWLEDGEMENT AND CONSENT

I acknowledge that a facsimile or copy of this document shall have the same validity, force and effect as the original. System Regulation 33.99.14 addresses the operation of criminal history background checks within the A&M System, including appeal procedures. The Texas A&M University System regulations require that an employee must report to his/her supervisor any criminal arrests, criminal charges, or criminal convictions, excluding misdemeanor traffic offenses punishable only by fine, within 24 hours or at the earliest possible opportunity. Failure to report shall constitute grounds for disciplinary action, up to and including termination. The employee's supervisor must report the arrest(s), criminal charge(s), or conviction(s) to both the head of the department/unit and the Human Resources Office. If you have questions, please contact Human Resources at (361) 825-2627.

I hereby certify that all information provided by me on this form is true, complete, and correct. I understand that any false statements made herein may void my application for employment, be grounds for termination of my current employment and affect my eligibility for future Texas A&M University-Corpus Christi employment.

Signature of Applicant / Employee / Volunteer

Date

**INSTRUCTIONS: Email completed form to [employment@tamucc.edu](mailto:employment@tamucc.edu) or bring in person to NRC Suite 2425.**