



DIVISION OF PERSONNEL MANAGEMENT REFERENCE CHECK CONFIDENTIALITY AGREEMENT – Access to SkillSurvey Pre-Hire 360 –

This form is required for all employees who will be granted access to SkillSurvey Pre-Hire 360 system to complete reference checks on applicants applying for employment opportunities with the state agency listed below. A new form is required for any changes to access.

THIS SECTION TO BE COMPLETED BY EMPLOYEE	
NAME:	SUPERVISOR:
AGENCY / DIVISION / WORK UNIT	JOB TITLE OR CLASSIFICATION

AGENCY WHICH ACCESS SHOULD BE GRANTED *(If requesting access to more than one agency in SkillSurvey, please list all.)*

This is to certify that I am an employee of the State of Wisconsin and I understand that in the course of my work assignments, I have been granted access to confidential selection information (written, verbal, from an online system or other form) including applicant identities, evaluation materials, identities of references, reference questions, answers to reference questions, ratings of applicants, etc.

I am aware that the State of Wisconsin Work Rules, Code of Ethics, and any agency specific policies and internal security procedures must be followed. I understand that the above-listed documents and information, as well as other information to which I have access, is special or confidential information within the meaning of § 230.43, Wis. Stats. I agree to keep this information confidential and not to copy the materials, discuss them with anyone not specifically authorized by the Human Resources Specialist, Manager, or Representative, or allow any unauthorized person access to them. Disclosing information to unauthorized persons is a violation of § 230.43, Wis. Stats. This violation is a misdemeanor punishable by a fine of not less than \$50 nor more than \$1,000 or by imprisonment for not more than one year in the county jail or both.

By signing below, I acknowledge that failure to adhere to the requirements set forth in this statement may be a violation to the public trust and may be considered just cause for discipline, up to and including termination, under § 230.34, Wis. Stats., grounds for civil or criminal penalties under §§ 19.579, 19.58, or 230.43, Wis. Stats., or both.

I understand that I should direct questions to my manager or the HR Director for my agency.

EMPLOYEE SIGNATURE	DATE
--------------------	------

THIS SECTION TO BE COMPLETED BY HUMAN RESOURCES STAFF

I certify that I am requesting access to the SkillSurvey Pre-Hire 360 system for an employee who is not in a human resources related position. The above employee will be trained on the system, policy, and agency practice of handling reference checking materials. I certify that our HR Department partners with agency/program staff to conduct and complete the reference checking process.

HR MANAGER/DIRECTOR NAME:

SIGNATURE	DATE
-----------	------

DIVISION OF PERSONNEL MANAGEMENT APPROVAL

DPM REPRESENTATIVE NAME:

SIGNATURE	DATE
-----------	------