



Greg Jordan  
Chief of Police

## Boiling Spring Lakes Police Department

9 East Boiling Spring Road,  
Boiling Spring Lakes, North Carolina  
28461

### *Authorization for Release of Personal Information*

To Whom It May Concern:

I am an applicant with the Boiling Spring Lakes Police Department. In order to determine my suitability for employment, I understand that the Boiling Spring Lakes Police Department must make a thorough investigation of my personal records and personal background. It is in the public's interest that all relevant information concerning my personal and employment history be disclosed to the above agency.

Therefore, I \_\_\_\_\_, DOB \_\_\_\_\_, Driver's License State/# \_\_\_\_\_ do hereby request and authorize

- Bank, Credit Union, or other Financial Institution
- Credit Bureau
- Consumer Report Agency
- Retail Business Establishment
- Doctor or other health care professional including mental health, alcohol treatment center, hospital, or other repository or medical records.
- Educational Institution
- Military Organization
- Insurance Company
- Criminal and Civil Courts
- Certification/Licensing Commission
- Former and Present Employer

Any other individual agency to produce and provide copies of any and all information to the authorized agent of the Boiling Spring Lakes Police Department regarding me whether of privileged or confidential nature.

Moreover, I hereby release the Boiling Spring Lakes Police Department from any civil or criminal liability whatsoever for seeking such requested information and for evaluating such information as it relates to my employment with the City of Boiling Spring Lakes Police Department. And, I hereby release the issuing agency and employees, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result because of compliance with this authorization and request.

I further waive all right to inspect or review any information compiled in reference to my application for employment as allowed by law. I do further authorize the Boiling Spring Lakes Police Department, its agents and employees, to release copies of any and information to any agency or entity regulating certification, authority or conduct of law enforcement officers. This is to include, but not limited to: North Carolina Criminal Justice Education & Training Standards Commission, North Carolina Attorney General's Office, agencies of other states and the federal government and the applicant's/officer's employing agency.

I hereby acknowledge that this authorization is valid for one (1) year or until the employment application or investigative process has been completed, whichever is later.

State of North Carolina \_\_\_\_\_

County of \_\_\_\_\_

Subscribed and Sworn to before me,

This the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Notary Public & Seal

My Commission Expires: \_\_\_\_\_

Applicant Signature

Printed Name

Address \_\_\_\_\_

Phone Number \_\_\_\_\_