

WHITE LAKE POLICE DEPARTMENT

CHIEF OF POLICE E. BRUCE SMITH

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Authorization for Release of Personal Information To Law Enforcement Agencies for Employment Purposes

To Whom It May Concern:

I am an applicant for a position with the **White Lake Police Department**. To determine my suitability for employment, I understand that the **White Lake Police Department** Bladen County, White Lake, North Carolina 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 _____, Operators License # ______, do hereby request and authorize any bank, credit union, lending or financial institution, credit bureau, consumer report agency, retail business establishment, former and present employer, educational institution, doctor or other health care professional including mental health, alcohol treatment center, hospital, or other repository of medical records, insurance company, governmental agency, criminal and civil courts, certification/licensing commission, military organization, and any other individual agency to produce and provide copies of any and all information to the authorized agency of **White Lake Police Department**, Bladen County, White Lake, North Carolina regarding me whether of a privileged or confidential nature.

Moreover, I hereby release the **White Lake Police Department**, Bladen County, White Lake, North Carolina from any civil or criminal liability whatsoever for seeking such requested information and for evaluation such information as it relates to my employment with the **White Lake Police Department**, Bladen County, and White Lake, North Carolina. And I hereby release the issuing agency and its agents, both individually and collectively, from 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. I do further hereby authorize the **White Lake Police Department**, its agents, and employees, to release copies of all information to any agency or entity regulating the 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 Sheriff's Education Training & Standards Commission, North Carolina Attorney General's Office, agencies of other states and the federal government, and the applicant's/officer employing agency.

A copy of this document is considered valid, just as the original.

I have fully read and understand the above statements.

State of North Carolina County of _____

Subscribed and sworn to before me,

This is the _____ day of _____, _____

Employee Signature

Employee Printed Name

Notary Public and Seal

My Commission Expires: