



**BRISTOL BAY BOROUGH
JOB APPLICANT'S AUTHORIZATION FOR RELEASE OF INFORMATION**

I hereby authorize the Bristol Bay Borough, its employees, agents, professional investigators, or any representative of the Borough, to perform investigations into my background, past behavior, character, and reputation. I authorize any and all former employers, credit agencies, educational institutions, law enforcement agencies, city, state, borough, and federal agencies or courts, or military services to release information about my background, including but not limited to information about employment, education, consumer credit history, driving record, criminal record and general records history, to the Borough. I understand that any or all of these investigations or inquiries can be performed prior to and periodically throughout the duration of employment with the Borough.

I authorize all former and current employers to release any and all information regarding my employment history, including my personnel file and all other pertinent information. I further authorize my supervisors to disclose their opinions and observations of my work habits, qualities, competency, and skills.

I understand that the information requested is for use by the Borough and may be re-disclosed only as authorized by law. I understand that I have the right to request from the Borough a written disclosure of the nature and scope of the investigation conducted that I authorized above if: (1) Any adverse action/decision is made based on the information in the consumer report & (2) If the request is made in writing within 60 days of the adverse action. If an Investigative Consumer Report has been conducted, I will be notified in writing within five days of receipt of my request for said report.

I believe to the best of my knowledge that all information I have provided is accurate, true, and correct and that I fully understand the terms of this release. I indemnify, release and hold harmless the Borough, any agents of the Borough, or others reporting to or for the Borough, any investigators, former employers, reporting agencies, and all those supplying references and character references, from any and all claims, defamation, demands, and/or liabilities arising out of, or related to, such investigations, disclosures,

or admissions.

TO BE COMPLETED BY APPLICANT ONLY

Job Title & Department				Job Posting #:				
Last Name				First Name		MI	Suffix (Jr., Sr., etc.)	Gender: M/F
Place of Birth (City/State)			Date of Birth	Social Security #		Driver's License # & State		
Home Address (Physical)			City		State & Zip		Phone	
Other States and Counties Lived In Within the Past 10 Years (Provide physical addresses)			City & County		State & Zip	From (Year)	To (Year)	
Aliases/Other Names Used			First Name		MI	Suffix (Jr., Sr., etc.)	From (Year)	To (Year)
Last Name			First Name		MI	Suffix (Jr., Sr., etc.)	From (Year)	To (Year)

Applicant Signature _____ Date _____ E-mail Address _____

Office Use Only Title _____ Fund/Org _____ Order # _____ Date Ordered _____
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