



CITY OF MIRAMAR

AUTHORITY TO RELEASE INFORMATION

In connection with my application for employment/volunteerism/internship (including contract for services), I understand that consumer reports or investigative consumer reports, which may contain public record information, may be requested or made on me including consumer credit, criminal records, driving record, education, prior employer verification, and workers compensation claims. These reports may include my work experience along with reasons for termination of past employment. Further, I understand that you will be requesting from various Federal, State, Local and other agencies, which may contain past activities.

I hereby authorize my employer, and any party of agency contacted by this employer, from any and all liability for damages of whatever kind, which may, at any time, result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it.

I have the right to make a request, upon proper identification and the payment of any authorized fees to the authorized agency responsible for conducting background checks, for the information in its files on me at the time of my request.

Should there be any questions as to the validity of this release, you may contact me as indicated below.

Name: _____ **Phone:** _____

Street Address: _____

City: _____ **State:** _____ **Zip:** _____

Driver License State: _____ **License Number:** _____

Social Security No.: _____

For identification purposes:

Date of Birth: _____ **Race:** _____ **Gender:** _____

Other or former names: _____

Signature: _____ **Date:** _____