

CITY OF CHARLOTTESVILLE

Authorization for Release of Personal Records & Information Consent Form



I, hereby, authorize the City of Charlottesville Virginia and/or their appointed designee to obtain and/or receive any criminal history record and/or driver history record information pertaining to me which may be in the files of any state or local criminal justice agency in any state within these United States or in any other country.

I also authorize any authorized representative of the City of Charlottesville, Virginia bearing this release, or copy thereof, within one year of its date, to obtain any information and/or records concerning myself, whether the said information and/or records are of a public, private or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of the following records and request that the custodian of such records and information permit my records to be examined, copied or otherwise reviewed.

1. Information and/or records from any educational institution that I have attended including, but not limited to, academic achievement, attendance, athletic, personal history, and disciplinary actions.
2. Information and/or records from my past or present financial records contained in any financial or credit institutions including, but not limited to, records of loans, the records of commercial or retail credit agencies (including credit reports and/or rating), and other financial statements and records wherever filed.
3. Information and/or records pertaining to my employment, past and/or present, but not limited to, current and past employment records, polygraph reports and charts, background records, efficiency rating, complaints or grievances filed by or against me, disciplinary records, and personal history. I also authorize release of any information concerning pre-employment records for which I am currently or have been an applicant or candidate; these records/information to include, but not limited to, polygraph reports and charts, background reports, and any other information included in my pre-employment file.
4. Information and/or records pertaining to my personal history past and/or present, including, but not limited to, birth records, marriage and/or divorce documents, and name changes wherever filed.

A photocopy of this release form will be valid as the original even though the original copy does not contain an original writing of my signature.

This release is executed with the full knowledge and understanding that the information is for the official use of the City of Charlottesville, Virginia. Consent is granted to the City of Charlottesville, Virginia to furnish such information as described above to third parties in the course of fulfilling its official responsibilities.

I hereby waive and release any claims against any party which I may have as the result of the release of records or information referenced in this Authorization and acknowledge that no party shall have any liability to me as a result of complying with a request for such information and records.

I am furnishing my social security account number on a voluntary basis with the understanding that federal statute or regulation does not require such. I have been advised that this number will be used only to facilitate the location of above information and records concerning me in connection with this application. Should there be any questions or concerns regarding the validity of this document, you may contact me as indicated below.

This document contains two type written pages, each of which reflects my signature.

Full Name (printed): _____

Signature: _____

Driver's License number: _____

Street Address: _____

City, State, and Zip code: _____

Home Phone: _____ **Work Phone:** _____

Date of Birth: _____

Sex: _____ **Race:** _____

Social Security Number: _____

Date Signed: _____ **Notary Public:** _____

Commission Expires: _____

Attention: Notary public. Please provide your seal. This document might be used out of state.