CALVERTON PARK POLICE DEPARTMENT



CHIEF JAMES BUCHANAN

CERTIFICATE OF APPLICANT AND AUTHORIZATION FOR RELEASE OF INFORMATION

Last Name	First Name	Middle Name	
SSN	Date of Birth	Applicant #	
Constant Section Secti		Leave Blank	

I______ (print full name), hereby certify that all statements made on or in connection with this application are true and complete to the best of my knowledge. I understand and agree that any misstatements or omissions of material facts will cause forfeiture on my part of all rights to initial employment or continued employment by the Calverton Park Police Department.

The intent of this authorization is to make available a full and complete disclosure of any and all information pertaining to my person; therefore, I do hereby authorize all present or past employers, all law enforcement agencies, all military agencies, the Veterans Administration, the U.S. Army, U.S. Air Force, U.S. Navy, U.S. Coast Guard, all Federal, State or local government agencies, State and Federal tax bureaus, credit bureaus, schools, insurance companies and universities to furnish the Detective of personnel services of the Calverton Park Police Department with any and all available information regarding my past or present performance, conduct or behavior. I further authorize the release of any punitive or disciplinary action, or memorandum, to the Detective in order that the information be evaluated to assist in the determination of my suitability for police work.

I understand the Calverton Park Police Department's acquisition, retention, and sharing of information related to my employment application is generally authorized under state and federal citations. The purpose for the Department requesting this information is to conduct a complete background investigation pertaining to my fitness to serve as a Calverton Park Police Department employee. This background investigation may include inquiries pertaining to my employment, education, credit history, criminal history, and any information relevant to my character and reputation. By signing this form, I am acknowledging that I have received notice and have provided consent for the Calverton Park Police Department to use this information to conduct such a background investigation, which may include the searching of N-Dex, criminal justice databases, private databases, and public databases.

I reiterate and emphasize that the intent if this authorization is to provide full and free access to the background investigation.

I authorize the Calverton Park Police Department to make inquiry and gather any documents of my present and past employers regarding my character, integrity, reputation and performance.

I authorize the release of any and all of the aforelisted information regarding my person, employment, credit or any other aspect, whether personal or otherwise, that may or may not be in their written records.

I understand that all materials pertaining to this background investigation become property of the Calverton Park Police Department and will not be made available or returned to me.

I agree to indemnify and hold harmless the person to whom this request is presented, along with the company or organization therein from any and all claims, damages, losses and expenses, including reasonable attorney's fees arising out of complying with this request.

I understand that in the event my application is disapproved, the sources of information obtained are confidential and cannot be revealed to m.

A copy of this authorization will be considered as effective and valid as the original, even though the copy does not contain an original writing of my signature.

MUST BE SIGNED IN THE PRESENCE OF A NOTARY:

Subscribed and sworn before me this	day of	, 20
My commission expires	, 20	2
Notary:		
Signature:	Date:	

52 Young Drive Calverton Park, Missouri 63135

Station: (314) 524-1212 Dispatch: (314) 522-3100 Fax: (314) 524-3065