



City of Robinson Police Department

Chad A Weaver, Chief of Police
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TO SERVE & PROTECT

AUTHORIZATION FOR RELEASE OF INFORMATION

I, _____, date of birth _____
authorize representatives of the Robinson Police Department to obtain pertinent information from my current and previous employers, references, law enforcement agencies, and other entities and persons with knowledge of my work history and background, including but not limited to, education, military service, welfare and unemployment history, and medical/psychological history. I authorize my previous and current employers, references, law enforcement agencies, and other entities and persons with knowledge of my work history and background to provide pertinent information to the Robinson Police Department and hereby release all such persons and waive any and all claims, demands, or cause of action whatsoever, in connection with the request for any release of such information.

I further authorize representatives of the Robinson Police Department to obtain a consumer credit report, as part of the application process and background investigation for a police officer position.

I have read, understand, and agree to the forgoing.

Note: A copy of this authorization/release form shall be considered as valid as the original.

SIGNATURE OF APPLICANT

DATE