

**PERSONAL INQUIRY WAIVER - AUTHORITY FOR RELEASE OF INFORMATION
CULVER POLICE DEPARTMENT**

To: Concerned person(s) or authorized representative of any organization:

I, _____, Date of Birth _____,

Social Security Number _____, respectfully request and authorize you to furnish the CULVER POLICE DEPARTMENT any and all information on records you have concerning my work, schooling, military, reputation, all medical, physical, and mental records or reports, including all information of a confidential or privileged nature and copies of the same if requested. This information is to be used to assist the CULVER POLICE DEPARTMENT in completing a background history for their confidential use. I hereby release you, your organization, or others from any liability or damages which may result from furnishing the information.

MUST BE SIGNED IN THE PRESENCE OF NOTARY

Signature of Applicant _____ Date _____

Subscribed and sworn before me this _____ day of _____ 20____.

Signature of Notary Public

My commission expires _____ City _____

County _____ State _____