Smith Center Police Department

119 West Court
P. O. Box 293
Smith Center, Kansas 66967
785-282-6035/Fax – 785-282-3223

AUTHORIZATION FOR RELEASE OF INFORMATION

I authorize the Smith Center Police Department to make inquiry of my present and past employers regarding character, integrity and reputation.

Exceptions:

(Make note if you do not wish your present employer to be contacted and why)

Signed: ______ Date: _____

Social Security Number: _____

Home Phone Number: _____

Work Phone Number: _____

Notary: _____

Date: _____

Commission Expires: _____

(Notary Seal)