

STATE OF CALIFORNIA - BUSINESS, TRANSPORTATION AND HOUSING AGENCY

DEPARTMENT OF CALIFORNIA HIGHWAY PATROL EXPLORER AUTHORIZATION TO RELEASE INFORMATION





I have applied to the State of California for a position with the California Highway Patrol. I hereby authorize the California Highway Patrol, or any other law enforcement agency designated by the California Highway Patrol, to investigate my present and past record or character, and to ascertain any and all information which may concern my record or character, whether the same is of record or not. This authorization includes, but is not limited to, information, records, statements, and opinions pertaining to my employment, preemployment, military, financial, credit, selective service, conviction, driving, traffic reports, or educational histories including, but not limited to, academic achievement, attendance, athletic performance, disciplinary records, background reports, truth verification examinations, and psychological examination results, efficiency ratings, any and all internal affairs investigations, complaints or grievances filed by or against me, information of a confidential or privileged nature, and the recollection of attorneys at law. I further understand that statements will be solicited from past and present employers, acquaintances, spouses, etc., and that I waive any cause(s) of action against such interviewees based on the content of their statements. Additionally, notwithstanding the waiver of any cause(s) of action against interviewees, I understand that I can seek relief from any allegedly false or malicious statements by seeking an administrative appeal through the State Personnel Board. I further authorize the California Highway Patrol, or any other law enforcement agency designated by the California Highway Patrol, to examine and obtain copies and abstracts or records and documents.

The disclosure of this information will be used to assist the California Highway Patrol in determining my suitability for employment. However, if unable to obtain the requested information, the California Highway Patrol will not be able to complete a thorough background investigation and may be unable to determine my suitability for employment.

Upon presentation of this release, or a copy of it, I hereby direct and authorize you to fully and completely disclose and release such information and to release copies and abstracts to any officer or authorized representative of the California Highway Patrol or other law enforcement agency designated by the California Highway Patrol to conduct my background investigation.

This authorization, or a copy of it, when presented through the U.S. mail in conjunction with an official request or in person by an officer or authorized representative of the California Highway Patrol or other designated law enforcement agency, is valid for one calendar year (365 days) from the date I indicated below. This release is executed with full knowledge and understanding that the information is for the official use of the California Highway Patrol.

I hereby release all persons, organizations, corporations, or entities from any and all charges and liability for damages of whatever kind, which may at any time result to me, my heirs, family, or associates because of compliance with this authorization and request to release information, or any attempt to comply with it.

TO BE COMPLETED BY APPLICANT			
PRINTED NAME	SIGNATURE	DATE	
OTHER NAMES USED (MAIDEN NAME, NICKNAMES, ETC)	ADDRESS		
OTHER NAMES USED (MAIDEN NAME, MICRINAMES, ETC)	ADDRESS		
SOCIAL SECURITY NUMBER		(In accordance with the Federal Privacy Act of 1974, disclosure is voluntary.	
		fication purposes to ensure that proper records	
	are obtained.)		
ALL PURPO	SE ACKNOWLEDGEMENT		
A notary public or other officer completing this certificate verifies only the and not the truthfulness, accuracy, or validity of that document.	dentity of the individual who signed the d	ocument to which this certificate is attached,	
State of			
County of			
On before me,		,	
Date	Name and Title of Officer (e.g., 'Jane	e Doe, Notary Public')	
personally appeared			
	Name(s) of Signer(s)		
who proved to me on the basis of satisfactory evidence to be the person(s) wh	ose name(s) is/are subscribed to the within inst	trument and acknowledged to me that the	
executed the same in their authorized capacity(ies), and that by their signature	e(s) on the instrument the person(s) or the entity	upon behalf of which the person(s)	
acted, executed the instrument. I certify under PENALTY OF PERJURY under		, , , ,	
WITNESS my hand and official seal.	and latter of oracle of outmorning that the love	going paragraph to true and correct.	
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Signature	(seal)		