



Citizen Police Academy Candidate Authorization and Release

I, _____, do hereby authorize a review and full disclosure of all records and information concerning myself to any duly authorized agent or representative of the Indianola Police Department, whether said records and information are of public, private, or confidential nature.

I also authorize and request every person, firm, company, corporation, governmental agency, court, association or institution having control of any documents, records, and other information pertaining to me, to furnish to the said Indianola Police Department any such information, including documents, records, files regarding charges or complaints filed against me, formal or informal, pending or closed, or any pertinent data, and to permit the said Indianola Police Department or any of their agents or representatives to inspect and make copies of such documents, records and other information.

I hereby release, discharge and exonerate the said Indianola Police Department, their agents and representatives and any person so furnishing information, pursuant to this Authorization, from any and all liability of every nature and kind arising out of the furnishing, inspection, or collection of such documents, records and other information of the investigation made by the said Indianola Police Department.

A photocopy of this authorization and release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

I have read and fully understand the contents of this "Authorization and Release."

Signature (include maiden name)

Printed name: _____

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

Address: _____

Notary Public of Iowa. My Commission expires
_____.

Phone: _____

Date of Birth: _____