

AUTHORIZATION FOR CRIMINAL BACKGROUND CHECK

I _____, born at _____

On _____, 19____, having filed an application for the **Lawrence Mass. CERT, Inc.** consent to have a criminal background check conducted by the Lawrence Police Department. This criminal background check will include, but not be limited to a Massachusetts Board of Probation records check. I understand that any information as may be obtained shall be reported to the appointing authority and I agree to provide any further information which may be required in reference to my past record.

I also authorize any other governmental agency or courts having control of any documents, records, or other information pertaining to me to furnish to the Lawrence Police Department any such information, including documents, records and files regarding charges or complaints filed against me, formal or informal, ending or closed, or any other pertinent data and to permit the Lawrence Police Department or any of its agents or representatives to inspect and make copies of such documents, records and other information.

I hereby release, discharge and exonerate the Lawrence Police Department, its agents and representatives, and any person so furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records and other information or investigations made by or on behalf of the Lawrence Police Department.

I understand this authority shall continue in force for one year unless sooner revoked in writing by the undersigned.

Signature of Witness LPD Officer

Signature of Applicant

Signature of Witness CERT Officer

Address

Signature of Notary if Witness not available or by mail

City, State, Zip Code

Date: _____

NOTARY STAMP

(One Witness Required)