

City of Wilmington

Criminal History Inquiry Waiver

Authority for Release of Information

I hereby authorize and request the release of any and all information you have concerning me (including a transcript of any academic work, credit report, driving history, criminal history or other records as applicable) to the City of Wilmington upon presentation of this release or copy thereof. I understand that any information released and obtained by the City of Wilmington from this authorization, may be considered when determining my employability/volunteer/contract ability with the City of Wilmington. Based on the information gathered from this release, I may not be considered for employment/volunteering/contracting.

I hereby release you and your organization or others from any liability or damage which may result from furnishing the information requested above. I understand that the City of Wilmington will not reveal to me the nature or contents of any confidential reports received. I certify that to the best of my knowledge and belief the information listed below is true and correct. I further certify that I have personally executed this waiver and release with my legal signature.

Male Female Date of Birth _____

Caucasian (not of Hispanic Origin) (B) African American/Black (C)
(Not of Hispanic Origin)

American Indian/Alaskan Native (F) Asian/Pacific Islander (E)

Hispanic (D)

Position Applying For

Date

Applicant's Signature

Applicant's Social Security Number

Applicant's Printed Name

State of _____

County of _____

Before me personally appeared _____, and did
execute the foregoing instrument in my presence on _____ day of _____ 20____.

My Commission Expires

Notary Public