

## HARWICHPOICE DEPARTMENT 183 Sisson Road, Harwich, MA 02645 Tel 508-430-7541 Fax 508-432-2530



DAVID J. GUILLEMETTE Chief of Police

KEVIN M. CONSIDINE Deputy Chief

## **AUTHORITY FOR RELEASE OF INFORMATION**

I,	, born on	and having
I,, born on and having filed an application for employment with the Harwich Police Department, consent to having an investigation made as to my moral character, reputation and fitness for the position for which I have applied, and such information as may be received by or reported to the Harwich Police Department, the Harwich Town Administrator, or the Harwich Board of Selectmen. I agree to give any further information which may be required in reference to my past record.		
I also authorize and request every pers association or institution having contropertaining to me furnish to the Harwic not limited to documents, records, files or informal, pending or closed, or any Department or any of its agents or representation.	of of any documents, records in Police Department any such is regarding charges or compother pertinent data, and to	s and any other information ch information, including but laints filed against me, formal permit the Harwich Police
I hereby release, discharge, and exoner representatives, and any person so furn nature and kind arising out of the furni information during the investigations r	ishing information from any shing or inspection of such	y and all liabilities of every documents, records, and other
A photocopy of this release form will be photocopy does not contain an original		f, even though the said
This authority shall continue for one yesooner revoked in writing by me.	ear from the date indicated u	ınder my signature unless
Applicant Signature:		
Date:		
Social Security Number:		
Notary Public:		
My Commission Expires:		