



**FRANKLIN COUNTY  
EMERGENCY MANAGEMENT**

1011 E. Ainsworth St.  
Pasco, WA 99301  
(509) 545-3546



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## AUTHORITY TO RELEASE INFORMATION

I understand that in processing my application an investigation may be made in which information is obtained through personal interviews and a review of information held by law enforcement or other government agencies. I authorize you to verify my past employment and education, criminal records, credit history, motor vehicle records, and personal references and other job related data provided on this application or via the interview process. I authorize the appropriate individuals, companies, institutions or agencies to release information and I release them from any liability as a result of such inquired or disclosures. I have the right under the "Fair Credit Reporting Act" to make a written request within a reasonable period of time to receive detailed information about the nature and scope of this investigation.

I agree that any decision to hire me is contingent upon the results of my investigative report. I also understand that false or misleading statements on this application or concealment of requested facts may be considered cause for dismissal.

FULL NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_