

# AUTHORIZATION FOR RELEASE OF INFORMATION

Rev. 06.28.2018

I, \_\_\_\_\_ hereby authorize any individual, organization, court, or law enforcement agency to release any and all records related to my prior law enforcement training and certification or licensure; any and all records related to any criminal or internal investigation conducted on me; and any and all pre-employment application or employment records pertaining to me, to the Missouri Department of Public Safety's Peace Officer Standards and Training Program for the purpose of obtaining or retaining a peace officer license.

A copy of this authorization will be considered as effective and valid as the original and shall not expire.

\_\_\_\_\_  
**Signature of Applicant or Licensee**

\_\_\_\_\_  
**Date**

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. I am commissioned as a notary public within the county of \_\_\_\_\_, state of \_\_\_\_\_, and my commission expires on \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
**NOTARY PUBLIC**