



Town of Wrentham
Wrentham, MA 02093

Authorization to Release Information

Please Accurately And Completely Provide The Following Information (print clearly in ink or type, and attach additional sheets as necessary):

| | | | |
|------------|-------------|-----------|--------|
| First Name | Middle Name | Last Name | Suffix |
|------------|-------------|-----------|--------|

Previous Name(s) Or Alias(es) (Include Maiden name): _____

Current Residential Address (physical address, not a Post Office Box):

| | | | | |
|--------|--------|-----------|-------|----------|
| Number | Street | City/town | State | Zip Code |
|--------|--------|-----------|-------|----------|

Mailing Address (if different):

| | | | |
|---------|-----------|-------|----------|
| Address | City/town | State | Zip Code |
|---------|-----------|-------|----------|

In connection with my application for employment and/or employment with the Town of Wrentham, Massachusetts (the "Town"), I hereby authorize and request full and complete disclosure to the Town of Wrentham of any information pertaining to my personal character and employment record (including but not limited to dates of employment, compensation, positions held, attendance, complaints, performance and disciplinary records; pre-employment and post-employment information; education, criminal background, civil complaints, and driving history).

I hereby release the Town of Wrentham and anyone providing such information, and their representatives and agents, from any and all liability or damages of whatever kind that may result to me because of compliance (or attempted compliance) with this authorization and request at any time on or after the date of this authorization and, if hired, throughout my employment.

I understand that any information obtained or developed, directly or indirectly, in whole or in part, upon this Authorization to Release Information may be considered in determining my suitability for employment by the Town, and will become the property of the Town.

I understand a photocopy of this release form will be valid as an original hereof, even though said photocopy does not contain an original writing of my signature.

Signature

Date