COMBINED REGIONAL 911

Combined Regional Communications Authority 136 Justice Center Rd Ste 400

36 Justice Center Rd Ste 400 Canon City, CO 81212 719-792-6411

BACKGROUND INVESTIGATION AUTHORIZATION

I,(ye referenced in the application for empand ALL information to the Combined Frecom911 concerning my previous epersonal or otherwise, with regard to	oloyment or Regional Comployment,	disclosed du mmunication education o	ring the inns Authoriter any othe	terview t ty (CRCA) r informa	also known as tion you have
(records, statements and of employment, military records histories including but not li- training records, personal his polygraph results, efficiency r complaints or grievances file investigation(s) files or any other	., selective se mited to: ac story, discipl atings, any a ed about, ag	rvice, crimin ademic achi inary action nd all intern gainst or by	al, driving evements, s, backgroal affairs in me, cur	or educa attenda ound reponvestigati	tion nce, orts, ons,
I hereby request you release such in bearer of the release request. I, and all liability from any damages information to a representative of CR	which may	(your n result from	ame), releated the furnis	ase all pa shing of t	rties from any the requested
I,(your name), centered for the second secon	nds for disqu	ialification fi	om consid	leration o	f employmen
Applicant Printed, Full Legal Name:					
Applicant Aliases or Nicknames:					
Applicant Signature:	····				

Date of Birth: _____ Last four of Social Security number: ____