Name: _	
SSN #:	



Arizona Peace Officer Standards and Training Board AUTHORIZATION FOR RELEASE OF INFORMATION

I,, DO HEF	REBY AUTHORIZE any and all persons,		
(print name)			
employers, partnerships, corporations and all civilian and government entities, military agencies, law			
enforcement agencies, private, and city, county, state and federal entities to release, furnish and			
exchange any and all available information relating to me for the purpose of determining my			
suitability to be appointed and certified as a peace officer. This includes, but is not limited to, all			
information related to my employment, performance, disciplinary history, character, integrity,			
reputation, conduct, behavior and fitness for duty.			
	OFFICER STANDARDS AND TRAINING BOARD		
and the(print agency name)	This release is in addition to,		
and not intended to curtail or diminish the authoriz			
HEREBY RELEASE from any and all liability, all p	persons or entities disclosing information pursuant		
to this release.			
SIGNATURE OF APPLICANT:	DATE:		
Sworn and Subscribed to Before Me This:	Day of, <u>20</u>		
BY:			
OTATE OF	Toolinty of		
STATE OF:	COUNTY OF:		
SIGNATURE OF NOTARY PUBLIC:	1		

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