## Monroe Community College Public Safety Department

## AUTHORIZATION AND RELEASE FOR LAW ENFORCEMENT RECORDS

To Whom It May Concern:

**I**, \_\_\_\_\_\_\_\_ hereby authorize and instruct any person, **sworn** or **unsworn**, employed by any law enforcement agency, police department or institution that reports to such an agency, to release and deliver to the Director, Monroe **Community** College Public Safety Department, or his designated representative, upon production of this document or a copy of same, any and all information records, reports and documents relating to any and all criminal charges, dispositions, and **traffic** contacts resulting between myself and any said agency, department or institution.

This authorization shall include the right of inspection and copying of any document contained in any such file or record, by the Monroe Community College Public Safety Department or its designated representative.

I also certify that any person, agency, department or institution who may furnish such information concerning me shall not be held accountable for giving this information; and I do hereby release such person, agency, department or institution from any and all liability which may be incurred as a result of fivnishing such information. I further release the Monroe Community College Public Safety Department from any and all liability which may be incurred as a result of collecting information.

A photocopy of this authorization and release will be valid as an original thereof even though the said photocopy does not contain an original writing of my dignature.

I have read and fully understand the contents of this authorization and release for law enforcement record.

		Applicant's Signature		dated	
		Address	City	State	Zip
<b>On</b> this	day of _	<b></b>			
described in t	00	instrument, and w			

## **NOTARY PUBLIC**