



MUNICIPAL POLICE OFFICERS' EDUCATION AND TRAINING COMMISSION

8002 Bretz Drive

Harrisburg, Pennsylvania 17112-9748

<http://www.psp.pa.gov/MPOETC>

AUTHORIZATION AND RELEASE FORM

REQUEST FOR EMPLOYMENT INFORMATION

The release of Employment Information to a prospective employing law enforcement agency during a background investigation is authorized by 44 Pa. C.S., Chapter 73 (relating to law enforcement background investigations and employment information). Requests for employment information must be in writing, accompanied by an original Authorization and Release Form signed by an applicant and an authorized representative of the law enforcement agency.

OFFICER LAST NAME	OFFICER FIRST NAME	OFFICER MIDDLE NAME/INITIAL	TELEPHONE	
OFFICER MAILING ADDRESS		CITY/BORO	STATE	ZIP CODE
OFFICER SSN	OFFICER DATE OF BIRTH		OFFICER DRIVERS LICENCE NUMBER	

REQUESTOR

LAW ENFORCEMENT AGENCY NAME <i>Monroe County Commissioners</i>	SIGNATURE OF AGENCY HEAD OR REPRESENTATIVE <i>HR Director</i>		
AGENCY ADDRESS <i>1 Quaker Plaza, Suite 202</i>	CITY/BORO <i>Stroudsburg</i>	STATE <i>PA</i>	ZIP CODE <i>18360</i>

AUTHORIZATION TO RELEASE RECORDS

I hereby authorize the law enforcement agencies listed below to release ALL employment and separation records related to my previous employment as a law enforcement officer to the requester as required in 44 Pa. C.S., Chapter 73.

AGENCY NAME _____

AGENCY NAME _____

AGENCY NAME _____

I hereby authorize the law enforcement agencies listed below to release ONLY those employment and separation records which are NOT protected by a confidentiality or non-disclosure agreement related to my previous employment as a law enforcement officer to the requester as required in 44 Pa. C.S., Chapter 73.

AGENCY NAME _____

OFFICER SIGNATURE	DATE
WITNESS SIGNATURE	DATE
WITNESS PRINTED NAME	TITLE