



CITY OF PORTLAND, OREGON



Bureau of Police

Sam Adams, Mayor

Michael Reese, Chief of Police

1111 S.W. 2nd Avenue • Portland, OR 97204 • Phone: 503-823-0000 • Fax: 503-823-0342

Integrity • Compassion • Accountability • Respect • Excellence • Service

AUTHORIZATION TO RELEASE INFORMATION

Personal Inquiry Waiver

TO WHOM IT MAY CONCERN:

I respectfully request and authorize you to furnish the Portland Police Bureau with any and all information that you may have concerning me, my employment, and work history. Please include any and all records and reports, including all information of a confidential or privileged nature, and photocopies of the same, if possible. Your reply will be used to assist the Bureau in determining my qualifications and fitness for the position I am seeking with the Portland Police Bureau.

I hereby release you, your organization and others from any liability or damage, which may result from furnishing the information requested.

Signature of Applicant

Printed Name of Applicant

Date of Signature – Valid for 180 days from date of signature.

I attest the applicant subscribed the above before me on the ____ day of _____, 200__ in the City of Portland, County of Multnomah, State of Oregon.

Notary Public for State of Oregon

Note: Photocopies of this request shall be for all intents and purposes as valid as the original.
You may retain this form for your files.