



Saint Regis Mohawk Tribal Police Department

545 State Route 37, Akwesasne New York 13655

Tel: (518)358-9200 Fax: (518)358-9334

This *Authority for Release of Information*, or copy thereof, constitutes my consent and authorization to any person(s) duly accredited by, and representing the Saint Regis Mohawk Tribal Police Department to obtain any information from your files, which is relevant to my application for employment with the Saint Regis Mohawk Tribe. With my consent and authorization, any person(s) or organization is directed to furnish such information upon request.

This authority for release of information, or copy thereof, constitutes my consent and authorization to release any information regarding property interest (real and personal), criminal justice agencies, regulatory agencies businesses, financial institutions, lending institutions.

This *Authority for Release of Information* is executed with full knowledge and understanding that the information is for official use only by Saint Regis Mohawk Tribe. And the information will be safeguarded against unauthorized disclosure to any agency or individual not having a legitimate need for it.

I hereby release any person(s) or organization, their employees, agents and officials from any and all liability for damages of whatever kind or nature on account of compliance, or any attempts to comply with this *Authority for Release of Information*.

Name (full)

Address

Date of Birth

Social Security Number

Date

Signature of Applicant

Notary