

AUTHORIZATION TO INVESTIGATE AND OBTAIN INFORMATION

I understand and acknowledge that I have applied for a position with the City of Kenai Police Department that requires regular access to important confidential information and that the performance or non performance of the position may jeopardize the safety of the public and employees of the Department. I hereby authorize the City of Kenai, its Police Department, officers, employees, agents and contractors (collectively "Police Department") to contact and inquire about me to any references I have provided as well as any other persons the Police Department reasonably believes may have information pertinent to my performance in the position for which I have applied. I further understand that a background check will be completed, and hereby authorize the Police Department to complete this for purposes of my employment. I realize that this background check may include, but not necessarily be limited to, an inquiry into government databases, and other sources, for any criminal history, traffic history, and law enforcement contacts involving me. This authorization does not in any way detract from or limit any other specific or implied authorizations provided to the Police Department as a part of this hiring process.

Applicant Signature

Date

Subscribed and sworn to before me on the ____ day of _____, 20 ____.

Notary Public Signature & Seal

Commission expiration date