## **CREDIT RELATED INFORMATION FORM**

**TO:** Credit Reporting Agency

I have applied for a position as a law enforcement officer with the **MOORHEAD POLICE DEPARTMENT**, Moorhead, Minnesota. As a part of that department's evaluation of my suitability for employment in this position, a background investigation is being conducted.

I request and authorize you to release any and all information concerning my credit, credit rating, and credit bureau reports to the department.

Please provide this information to the Moorhead Police Officer making this request or send it to:

Sandy Timian Moorhead Police Department P. O. Box 817 Moorhead MN 56561-0817

I hereby release you, your organization, and all others from liability or damages that may result from furnishing the information requested, including any liability or damage pursuant to any state or federal laws. I hereby release you, as the custodian of such records of (candidate print your name) \_\_\_\_\_\_\_\_\_ including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family, or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. I direct you to release such information upon the request of the duly accredited representative of the **MOORHEAD POLICE DEPARTMENT** regardless of any agreement I may have made with you previously to the contrary.

The **MOORHEAD POLICE DEPARTMENT** is requesting the information pursuant to this release will discontinue processing my application if you refuse to disclose the information requested.

For and in consideration of the **MOORHEAD POLICE DEPARTMENT'S** acceptance and processing of my application for employment, I agree to hold <u>PEOPLE FACTS</u> <u>EMPLOYMENT SCREENING</u> it's agents and employees harmless for any and all claims and liability associated with my application for employment or in any way connected with the decision whether or not to employ me with the **MOORHEAD POLICE DEPARTMENT**.

A photo copy or fax copy of this release form will be valid as an original thereof, even though the said photo copy or fax copy does not contain an original writing of my signature.

If employed with the MOORHEAD POLICE DEPARTMENT, I further authorize the MOORHEAD POLICE DEPARTMENT to check my credit record, as needed, on a continuing basis as it relates to my employment.

I understand that if an adverse employment decision is made due totally or partially to the information on the credit report, the MOORHEAD POLICE DEPARTMENT will give me a copy of the credit report, a summary of my rights under the Fair Credit Reporting Act, and the source of the credit report so that I may contact them, if I wish.

APPLICANT'S SIGNATURE