SANTA FE COUNTY
AUTHORIZATION TO RELEASE EMPLOYMENT RECORDS

You are hereby authorized to disclose and release to _____ of the Santa Fe County Sheriff's Department any and all information pertaining to my former employment with the above-referenced employer, including, but not limited to, job applications, contracts of agreement or employment, performance evaluation reports, personnel records, internal affair files and all other information and/or records, reports, or memorandums on file of every kind and character, and your opinions, written or oral, regarding my employment.

I hereby expressly waive any claim of privilege with respect to any disclosures which you may make to the above-mentioned person(s). I also hereby release the custodian or custodians of such records and the above-mentioned employer, including their employees, from any and all claims of liability or damage of any kind or nature which my arise as a result of the above-mentioned employer having released these files to _____ of the Santa Fe County Sheriff's Department.

A copy of this authorization will be effective as the original.

Applicant's Signature_____

STATE OF NEW MEXICO)
) ss.
COUNTY OF SANTA FE)

Subscribed and sworn to before me by _____ on this _____ day of _____, _____.

_____
Notary Public

My Commission Expires:
_____

5/99