

Dan Archibeque
Chairman



Sharon Bonner
Vice Chair

Manuel Alcala
Administrator

Civil Service Commission

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Erick Javaneau
Commissioner

AUTHORIZATION FOR RELEASE OF INFORMATION

As an applicant for employment with the City of Pueblo, Colorado, I hereby authorize full disclosure of the following described records and information concerning me to any duly authorized agent or other representative of the City of Pueblo for the purposes of determining suitability, fitness and/or eligibility for employment.

I authorize any agency of the City of Pueblo, which conducts this investigation, to disclose all information obtained during this investigation to any other agency of the City of Pueblo for the purposes stated herein.

I authorize and consent to full and complete disclosure of the following records and information: educational, financial, credit, business, tax, utility, past or present employment, health care, hospital, medical, workers' compensation, polygraph, criminal, civil, traffic, other court records, and any other records or information concerning my history.

I authorize and consent to full and complete disclosure of all records and information provided by me to any person for purposes of and in relation to my application for or prospective employment with the City.

I authorize and consent to full and complete disclosure of all records and information with respect to any pre-employment examination which may be required of me including polygraph examination, blood or urine drug screening, medical examination, and/or psychological examination.

I understand that some or all of those records may contain information concerning me, which would be personal, confidential, privileged or protected from disclosure without this authorization.

I understand that certain sources of such records or information may require an additional, separate or specific release, which I agree to sign and deliver to the City of Pueblo.

I hereby release the City of Pueblo, Colorado, or any of its agents, employees or representatives and any persons so furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records, and other information for the investigation made by the City of Pueblo, Colorado.

I understand that all information obtained during this investigation will be used by the City of Pueblo solely for its official use and only for the purposes stated herein, and that such information will not be disclosed to me or any other person except as required by law, provided, however, any admission or disclosure of felony criminal activity will be disclosed and reported to the appropriate law enforcement authority.

Photocopies of this authorization, which include a copy of my signature, shall be as valid as the original.

Name of Applicant

Signature

Last 4 of SSN

Date Signed

***** Note: electronic signatures are not accepted at this time. *****