AUTHORIZATION TO RELEASE INFORMATION

TO WHOM IT MAY CONCERN:

I,_____, am seeking employment or volunteer status with the Upper West Shore School District #33. I acknowledge that a complete investigation into my background is necessary to protect the safety and welfare of the children in the Upper West Shore School District #33. I hereby expressly and voluntarily give the Upper West Shore School District #33 the right to make a thorough investigation of my past employment, education, and activities. I specifically authorize the release of any and all information of a confidential or privileged nature, **including confidential criminal justice information as defined in Section 44-5-103(3), MCA,** to the staff of the Upper West Shore School District #33 and its agents. I understand that the Upper West Shore School District #33 reserves the right to use any lawful method of investigation that, in its sole discretion, it deems reasonable and necessary.

I hereby release the Upper West Shore School District #33 and any organization, company, institution, or person furnishing information to the District and its agents as expressly authorized above, from any liability for damage which may result from any dissemination of the information requested, subject to the provisions of Title 44, Chapter 5, Part 3, MCA.

This document is effective until revoked in writing by me.

_____ _____
SIGNATURE DATE

Print Full Name:_____

Print Full Address: _____

City: _____ State: _____ Zip: _____

Birth Date: _____ Social Security Number: _____

STATE OF MONTANA)
: ss.
County of _____)

On this _____ day of _____, 200_, before me, a notary public of the State of Montana, personally appeared _____, known to me to be the person named in the foregoing Release, and acknowledged to me that _____ executed the same as _____ free act and deed, for the uses and purposes therein mentioned.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my notarial seal the day and year in this certificate first above written.

_____
Notary Public, State of Montana
County of _____
My commission expires _____