

## CAERNARVON TOWNSHIP POLICE DEPARTMENT

3307 MAIN ST., P.O. Box 52, MORGANTOWN, PENNSYLVANIA 19543

Office Phone: (610) 286-1012 Emergency: 911 Fax: (610) 286-1002

# AUTHORITY FOR RELEASE OF INFORMATION (Background Investigation Waiver)

Having made application for certification or employment as a law enforcement officer within Caernarvon Township, Berks County Pennsylvania, I hereby authorize for one year, from the date of execution hereof, any authorized representative of the Caernarvon Township Police Department bearing this release to obtain any information pertaining to my employment, credit history, education, residence, academic achievement, personal information, work performance, background investigations, polygraph examinations, any and all internal affairs investigations or disciplinary records, including any files that are deemed to be confidential and/or sealed.

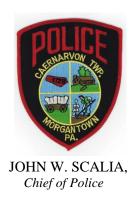
I also authorize release of any criminal justice records of arrests, citations, detentions, probation and parole records, or any police reports or other police records in which I may be named for any reason, including any files that are deemed to be juvenile and confidential.

I hereby direct you to release this information upon the request of the bearer, whether in person or by correspondence. I further authorize the bearer to make copies of these records. This release is executed with the full knowledge and understanding that these records and information are for the official use of the Caernarvon Township Police Department in fulfilling official responsibilities, which may include sharing the records or information with other criminal justice agencies.

I hereby release you, as the custodian of such records, and employer, educational institution, physician, hospital or other repository of medical records, credit bureau or consumer reporting agency, including its officers, employees, and 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.

A copy of this form will be as effective as the original. I hereby authorize the National Records Center, St. Louis, Missouri, or other custodian of my military record to release information or copies from my military personnel and related medical records, including a copy of my DD 214, Report of Separation, or other official documents from the United States Military denoting discharge status or current active military status to Caernarvon Township Police Department, 3307 Main Street, Morgantown Pennsylvania 19543.

Signed:	Printed:	_ Date:



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#### **Instructions to the Applicant – Personal History Statement**

The information that you provide in this Personal History Statement will be used in the background investigation to assist in determining your suitability for the position of Caernarvon Township Police Officer.

- It is your responsibility to complete this form and provide all required information.
- If you are filling out a printed copy of this form, neatly print in blue or black ink.
- You must respond to all items and questions. If a question does not apply to you, write "N/A" (not applicable) in the space provided for your response.
- If you need more space for any response, use the last page of this form and identify The additional information by question number.

#### Disqualification

There are very few *automatic* bases for rejection. Even issues of prior misconduct such as prior illegal drug use, driving under the influence, theft or even arrest or conviction are usually not, in and of themselves, automatically disqualifying. However, *deliberate misstatements or omissions* can and often will result in your application being rejected, regardless of the nature or reason for the misstatements/omissions. In fact, the number one reason individuals "fail" background investigations is because they deliberately withhold or misrepresent job-relevant information from their prospective employer.

#### BOTTOM LINE: You are responsible for providing complete, accurate and truthful responses.

In accordance with the U.S. American with Disabilities Act, the Genetic Information Nondiscrimination Act (GINA), and the Pennsylvania Fair Employment and Housing Act, applicants are not expected or required to reveal any medical or other disability-related information about themselves or their family members in response to questions on this form.

I have read and I understand the above instructions.							
Signed:	Printed:	Date:					

## CAERNARVON TOWNSHIP POLICE DEPARTMENT

Authorization	for Disclosure of	Social Networ	king Information	1	
my accounts ar	re set to "private" ow him or her to	I will log into	the account in the	ne presence of the Back	Fownship Police f my background check. If kground Investigations count(s) must be granted
investigation.	Any information	that is racist, s	sexist or would b		) is part of my background candidacy for the position on Township Police
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				will result in immedia Police Department.	te disqualification of
	s document, I am ocial networking a		ovide the Backgr	ound Investigations Of	fficer immediate access to
I do not hav	ve a social networ	king account			
I authorize t	the Background I	nvestigations (	Officer access to	my social networking	accounts(s)
I do not aut	horize the Backgr	ound Investig	ations Officer ac	cess to my social netwo	orking accounts(s)
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Candidate Sign	nature			Date	
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Background Investigations Officer		Date			
Facebook:	Google +	Twitter	YouTube	Pinterest	
MySpace	Instagram	Other		Other	