

26. HAVE YOU EVER APPLIED FOR ANY POSITION WITH ANY OTHER FEDERAL, STATE, CITY, MUNICIPAL, BOROUGH, OR OTHER GOVERNMENTAL AGENCY? YES NO IF YES, PROVIDE COMPLETE DETAILS, INCLUDING AGENCY NAME, LOCATION, DATES, ALL PORTIONS OF EACH PROCESS IN WHICH YOU PARTICIPATED, OUTCOME, AND/OR PENDING STATUS. PROVIDE A CONTACT NAME AND PHONE NUMBER FOR ANY APPLICATION PROCESSES FOR WHICH YOU HAVE BEEN INTERVIEWED, OR TAKEN A SUBSTANTIAL STEP IN THE PROCESS.

27. REMARKS:

**AUTHORIZATION FOR RELEASE OF INFORMATION
CERTIFICATION OF ACCURACY**

I, _____ AUTHORIZE RELEASE OF ALL INFORMATION PERTAINING TO ME FROM THE RECORDS OF CREDIT BUREAUS, EDUCATIONAL INSTITUTIONS, MILITARY SERVICES, LAW ENFORCEMENT AGENCIES AND PRESENT AND PAST EMPLOYERS, TO MY PROSPECTIVE EMPLOYER AND THE ALASKA POLICE STANDARDS COUNCIL. I ALSO AUTHORIZE THE ALASKA POLICE STANDARDS COUNCIL TO RELEASE TO ANY LAW ENFORCEMENT AGENCY, INFORMATION WHICH THE COUNCIL OBTAINS REGARDING MY QUALIFICATIONS TO BE A POLICE, CORRECTIONS, PROBATION/PAROLE, OR MUNICIPAL CORRECTIONS OFFICER.

I FURTHER AGREE AND CONSENT IN ADVANCE TO BEING SUMMARILY DISCHARGED WITHOUT CAUSE OR HEARING IF ANY OF THE INFORMATION THAT I HAVE PROVIDED CONTAINS ANY MISREPRESENTATION OR FALSIFICATION OR IF ANY REQUESTED INFORMATION HAS BEEN KNOWINGLY OMITTED. I ACKNOWLEDGE THAT INFORMATION ON THIS FORM WILL BE USED BY THE COUNCIL TO DETERMINE MY ELIGIBILITY AND QUALIFICATIONS FOR EMPLOYMENT, TRAINING, AND CERTIFICATION.

A PHOTOCOPY OR ELECTRONIC COPY OF THIS AUTHORIZATION IS AS VALID AS THE ORIGINAL.
THIS AUTHORIZATION DOES NOT EXPIRE UNLESS THE ALASKA POLICE STANDARDS COUNCIL IS NOTIFIED IN WRITING.

I CERTIFY UNDER THE PENALTY OF UNSWORN FALSIFICATION THAT THE FOREGOING IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

DONE AT _____, _____ ON THE _____ DAY OF _____, 2_____.
(CITY) (STATE)

SWORN TO AND SUBSCRIBED BEFORE ME

APPLICANT

THIS _____ DAY OF _____, 2_____.

NOTARY PUBLIC IN AND FOR THE STATE OF _____

MY COMMISSION EXPIRES _____

