

## Authorization for Release of Information

I am an applicant for a justice officer position with the \_\_\_\_\_.

In order to determine my suitability for this position and for justice officer certification or continued certification, I understand that the both the named hiring Agency and the North Carolina Sheriffs' Education & Training Standards Commission must make a thorough investigation of my personal records and personal background. It is in the public's interest that all relevant information concerning my personal and employment history be disclosed to the above Agency.

Therefore, I, \_\_\_\_\_, DOB \_\_\_\_\_, Operators License # \_\_\_\_\_, do hereby request and authorize any bank, credit union, lending or financial institution, credit bureau, consumer report agency, retail business establishment, former and present employer, educational institution, doctor or other health care professional including mental health, alcohol treatment center, hospital or other repository of medical records, insurance company, governmental agency, criminal and civil courts, certification/licensing commission, military organization, and any other individual agency to produce and provide copies of any and all information to the named hiring Agency and the North Carolina Sheriffs' Education & Training Standards Commission regarding me, whether of a privileged or confidential nature.

Moreover, I hereby release the named hiring Agency and the North Carolina Sheriffs' Education & Training Standards Commission from any civil or criminal liability whatsoever for seeking such requested information and for evaluating such information as it relates to my application for certification. And, I hereby release the issuing Agency and its agents and employees, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result because of compliance with this authorization and request.

I further waive all right to inspect or review any information compiled in reference to my application for certification as allowed by law. I do further authorize the named hiring Agency and the North Carolina Sheriffs' Education & Training Standards Commission, its agents and employees, to release copies of any and all information to any agency or entity regulating the certification, authority or conduct of law enforcement officers. This is to include, but not limited to: North Carolina Criminal Justice Education & Training Standards Commission, North Carolina Sheriffs' Education & Training Standards Commission, North Carolina Attorney General's Office, agencies of other states and the federal government, and the applicant's/officer's employing agency.

I hereby acknowledge that this Authorization for Release of Information shall remain valid for the duration of the application process through the North Carolina Sheriffs' Education and Training Standards Commission and shall not expire until such time as my application for certification is ultimately denied. In the event that I am issued certification, I further acknowledge that this Authorization for Release of Information shall remain valid until such time as my certification expires, is permanently surrendered to the Commission, or is revoked by entry of a Final Agency Decision.

**A copy of this document is considered valid, just as the original. I have read and fully understand the above statements.**

**STATE OF NORTH CAROLINA**

**COUNTY OF \_\_\_\_\_**

**Subscribed and Sworn to before me, this**

**the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_**

\_\_\_\_\_  
**(Notary Signature)**

\_\_\_\_\_  
**(Applicant Signature)**

**Printed Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Expires:** \_\_\_\_\_

**Phone:** \_\_\_\_\_



# Office of the Sheriff

Hoke County Sheriff's Office

HUBERT A. PETERKIN, Sheriff

429 East Central Avenue  
Raeford, NC 28376

PO Box 300  
Raeford, NC 28376

Phone (910) 875-5111  
Fax (910) 875-2034



Dear Applicant,

On behalf of Sheriff H. Peterkin and the Hoke County Sheriff's Office, I would like to thank you for your interest in employment with this agency.

As a professional law enforcement agency we process numerous applications and attempt to retain the most qualified applicants to be a part of our organization. In our attempt to be as thorough and as expedient as possible we have compiled a brief checklist to ensure your application is process in a timely manner.

1. Ensure all sections of this application are entirely complete, neat, and accurate.
2. If there is any information you are asked to provide, please do so completely and honestly. (Any omission may cause a delay in the screening process).
3. Ensure your contact information is current and accurate.
4. Ensure that your F-3 application and release of information forms have been signed and notarized prior to being submitted.

The application process is a very careful and deliberate one. We appreciate each applicants understanding and patience as we process each application. If there are questions about any of the forms, please do not hesitate to ask for clarification. **You will be contacted by a member of this office, by phone or mail, as soon as possible with an update on the status of your application. Please keep this page for your records.**

Respectfully,

A handwritten signature in blue ink that reads "Capt. Darnell Jacobs".

Capt. Darnell Jacobs  
Uniformed Services Captain  
Background Investigations