



POLICE RECORD RELEASE FORM

Medina County Career Center

- _____ Criminal Justice
- _____ Firefighter | EMT
- _____ Teaching Professions

I hereby authorize any local, county, state, or federal law enforcement agency to furnish any and all information regarding any arrests, convictions or information listed under my name which might be on file to the Medina County Career Center.

I hereby release said law enforcement agencies and the Medina County Career Center from all liability for damages whatsoever for furnishing and reviewing any information concerning me, whether by reason of unauthorized use, error, negligence or for any reason.

Date: _____

Name of Student: _____

Maiden Name/Alias (if any): _____

Address: _____

Date of Birth: _____

Social Security Number: _____

Home Phone Number: _____

Student Signature: _____

Parent/Guardian Signature: _____