

Madison Police Department

Applicant's Request/Waiver to Release Information:

I hereby authorize and request all persons to whom this request (original or reproduction) is presented, having information, relating to or concerning me, to furnish such information to a duly appointed officer of the Madison City Police Department.

I am aware that this information may be personal and may otherwise be protected from disclosure by my constitutional, statutory, or common-law privileges. I hereby expressly waive all privileges which may attach to such communication or disclosure and release all persons, firms, and corporations from all claims, of any nature as a result of said communication or disclosure.

Information to disclose:

- Financial Records
- Criminal History
- Check Educational Records
- Organizational Memberships
- Past/Present Employment Records

*Any background material/information relevant to reputation and/or moral character.

*These records will be retained on file in the Madison Police Department, in the Office of the Chief of Police.

Signature of Applicant: _____ Date: _____

State of: _____

County of: _____

Subscribed and sworn to before, a Notary Public, in and for said county and state, this _____ day of _____, 20____.

My Commission Expires: _____

Notary Public: _____

Printed: _____

County of Residence: _____

**NOTE: This page must be Notarized, signed, and returned with the application.*

Because of the sensitive and important position of a police officer, the Madison Police Department must select individuals who possess the best physical, mental, moral, and emotional character for the performance of police duties. To best ascertain who those individuals are, it is necessary to gather as much information as possible about each applicant which may have a bearing on their ability to perform. Several questions in this application are designed to give the Department a complete background on each applicant. Those particular responses to questions marked with an (*) The asterisk shall not act as an automatic bar to selection but will be considered along with the attendant facts. No question on this application is intended to secure information to be used for unlawful discrimination.

APPLICANT: PLEASE READ CAREFULLY BEFORE SIGNING. IF YOU HAVE ANY QUESTIONS REGARDING THE FOLLOWING STATEMENT OR ANY QUESTIONS CONTAINED IN THIS APPLICATION, PLEASE ASK EITHER THE CHIEF OF POLICE OR THE MAJOR OF THE MADISON POLICE DEPARTMENT.

* I certify that the information contained in this application is correct and complete to the best of my knowledge. I agree to inform the Department of any additional information relating to questions raised on the application, which occur subsequent to my completion of the application. I realize that misrepresentation of the fact of the failure to update any information relating to questions on the application may be cause for rejection of this application or dismissal after employment. Final employment is contingent upon satisfactory completion of all pre-employment procedures including interview, examinations, verification of all relevant information, and all post-employment examinations which may include but are not limited to physical and psychological examinations and any applicable statutory provisions. I acknowledge that I have read the above statement and fully understand the same.

Signature of Applicant: _____ Date: _____

State of: _____

County of: _____

Subscribed and sworn to before, a Notary Public, in and for said county and state, this _____ day of _____, 20_____.

My Commission Expires: _____

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