



LeRoy Police Department

110 S. East St., LeRoy IL 61752

Jason T. Williamson, Chief of Police



Emergency: 911

Non-Emergency: (309)-962-3310

www.leroy.org

Fax: (309)-962-7213

CONSENT AND RELEASE FOR BACKGROUND INVESTIGATION

Acknowledgment of Consent

I, _____, acknowledge that I am seeking employment in a safety-sensitive field and that establishing my employment eligibility requires a thorough investigation into my background and character.

Furthermore, I acknowledge and agree that as a condition of being considered for employment with the City of LeRoy IL Police Department ("Employer"), or for maintaining my continued employment with the employer, it is required that I consent to a complete and thorough investigation of my background to determine whether I am a suitable candidate for the position of Police Officer with the employer.

Mandatory Background Investigation

I authorize the employer to conduct a background investigation of me, which shall include, but shall not be limited to, a:

- (1) a review of my complete employment history;
- (2) a review of my complete criminal history;
- (3) a review of driving records;
- (4) a background check with the Department of Children and Family Services;
- (5) interviews with my personal references;
- (6) a review of all internal investigation files from any previous employers;
- (7) a verification of academic credentials and licenses;
- (8) a review of my military service history, if any; and
- (9) a review of the Illinois Law Enforcement Training Standards Board's records and officer misconduct database.

Credit Check

I hereby consent to the employer obtaining and reviewing any credit and consumer reports, as permitted under the federal Fair Credit Reporting Act and local or state credit privacy laws, if applicable. I understand that the Fair Credit Reporting Act, 15 U.S.C. 1681, et seq., authorizes

me to request a copy of any consumer credit report from the consumer reporting agency that compiled the report.

Consent to Release of Information

I hereby consent to the release of all employment records from my current and former employers, including, but not limited to:

- (1) job applications;
- (2) personnel files;
- (3) internal investigations;
- (4) separation agreements;
- (5) pre-employment evaluations;
- (6) tests;
- (7) questionnaires;
- (8) fitness-for-duty examinations; and
- (9) any other information obtained about me by the entity to whom this Consent is presented. Consent to Required Interviews and Evaluations I further agree to participate in a personal interview, testing process, polygraph examination, post-offer psychological evaluation and medical evaluation, or any combination of those examinations or tests, as determined by the employer.

Confidentiality

All information obtained by the employer under this background investigation shall be confidential and safeguarded against disclosure to all unauthorized persons as required by law. However, nothing prevents the employer from using the information obtained to evaluate my suitability for employment.

I specifically consent to the disclosure of information that may be covered by a settlement agreement or other confidentiality provision entered into with my former employers, and I waive any rights to enforce any prior confidentiality agreement against my former employer about this disclosure.

Waiver of Privacy

I waive any right or claim to privacy in such information and consent to the disclosure of information that may be exempt from disclosure by law. I waive any right I may have to be notified by any individuals and organizations named in my

application for employment before the release of any information to the employer, including the release of information concerning any disciplinary action taken against me by former employers.

Indemnification

In exchange for this release of all of my personnel information, I, agree to release, discharge, and hold harmless any person, firm, or entity and their employees and agents that disclose information in response to receipt of this consent, from any liability for all claims, liabilities, causes of action, known or unknown, fixed or contingent, that arise from or that are in any manner connected to the disclosure of any personal information as described above. I further release and hold harmless the employer and the employer's respective personnel, employees, and agents from any liability resulting from or in connection with, the results of this background investigation concerning my fitness for employment or continued employment at the employer or the decision to hire me, not to hire me, or retain me in my position.

Signature

I agree to sign this document and certify that I have read, understand, and agree to the terms and conditions set forth in this document and that this is a complete waiver under Section 10 of Employment Record Disclosure Act.

Signature _____ **Date** _____

Printed Name _____

The Board and any local or State agency, sheriff, police chief, county, municipality, private business or corporation, or other person is immune from suit or liability for submitting, disclosing, or releasing information of employment records, including background investigation materials collected in connection with making a final offer of employment; duty-related physical and psychological fitness-for-duty examinations; work performance records; records of criminal, civil, or administrative investigations of conduct; arrests; convictions; findings of guilt; pleas of guilty; or pleas of nolo contendere under this Section upon receiving a written release for those records executed and presented in accordance with this Section, as long as the information is submitted, disclosed, or released in good faith and without malice. The Board, all previous employers, and the agents and employees of all previous employers have immunity for the release of the information.

Notary:

State of Illinois
County of McLean

Signed or attested before me this _____ day of _____, 20____, by

_____.

(printed name/s of person/s)

Notary Public's signature

Notary registration number: _____

My commission expires: _____