



# COUNTY OF ERIE

## DEPARTMENT OF CORRECTIONS

Brenton Davis,  
County Executive

Kevin Sutter,  
Warden

### AUTHORIZATON FOR RELEASE OF INFORMATION

I \_\_\_\_\_, authorize the Department of Corrections of Erie County to make any investigation of my personal history, employment history, criminal history and driving violations. I also authorize the release of any information or documents to the Department of Corrections of Erie County concerning me for the purpose of seeking employment with the Department of Corrections of Erie County.

The following information is accurate: (Please print legibly or type)

NAME: \_\_\_\_\_  
(First) (Middle) (Last)

MAIDEN NAME: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

SEX: \_\_\_\_\_ RACE: \_\_\_\_\_

PHONE NUMBERS: \_\_\_\_\_  
(Home) (Cell)

Applicant Signature: \_\_\_\_\_ DATE: \_\_\_/\_\_\_/\_\_\_

Witness Signature: \_\_\_\_\_ DATE: \_\_\_/\_\_\_/\_\_\_

PLEASE ATTACH A COPY OF YOUR CURRENT DRIVER'S LICENSE