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## Consent Form to Authorize Release of Information

## RELEASE AUTHORIZATION

To all employers, Registrars, and Other Officials:

I hereby authorize Rutgers Cooperative Extension to conduct an investigation of my employment and personal history. You are, therefore, authorized by me to release to Rutgers Cooperative Extension, upon their request (provided that it is certified to you that I have an application for employment pending with Rutgers Cooperative Extension), any and all information pertaining to me, documented or otherwise, including but not limited to the results of any criminal background checks through fingerprinting or otherwise. This authorization shall supersede and countermand any prior contradictory request or instruction. A photocopy of this authorization should be considered as effective and as valid as the original.

Date:	By:		
	_	SIGNATURE	
Name:			
	(PLEASE PRINT)		
Social Security Number:			
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Witness:			
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Date:	_ By:	CIONIATIDE	
		SIGNATURE	
Name:			
	(PLEASE PRINT)		