

**EMPLOYER REQUEST AND LIABILITY RELEASE**

TO WHOM IT MAY CONCERN:

I respectfully request that you provide/forward to the City of Taylorville or any consumer-reporting agency, any and all information that you may have concerning me, my work record or my reputation through correspondence or personal interviews. Also please provide to the City of Taylorville, or any consumer reporting agency any and all information that may appear in my personnel file, including but not limited to commendations, counselings, disciplinary actions, salary information, positions held, dates of employment, and eligibility for continued (re) employment. This information is to be used to determine my qualifications and fitness for the position I am seeking. I agree that a facsimile (“fax”) or photographic copy of this Request and Release shall be as valid as the original.

The undersigned, by my signature below and in consideration of your providing the information requested to be considered for the position of part-time Airport Records Clerk for the City of Taylorville and other good and valuable consideration, releases, remises and discharges you and your employer and your its respective officials, officers, trustees, servants, agents, employees, agents and volunteers, jointly and severally, of and from all liabilities, injuries, losses and damages, both to my person and my property, whether such claims may arise under statute or under common law, and regardless of the nature, severity, or extent of damage or loss or injury, that shall have been caused, or may arise from or out of or otherwise be related to furnishing the background information outlined above to the City of Taylorville or any of the individuals or groups specified above, or any combination of the above, it being my intention to completely,

absolutely, and finally release you, your employer and all of the aforesaid entities and persons from any and all liability arising wholly or partially from any of the foregoing causes.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Address  
\_\_\_\_\_

Subscribed and sworn before me this \_\_\_\_\_  
day of \_\_\_\_\_, 20\_\_\_\_.

NOTARY SEAL

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Notary Address