

## **AUTHORIZATION TO RELEASE INFORMATION AND INVESTIGATE**

(Carefully read this authorization to release information about you and to investigate you, then **sign and date it in ink in the presence of a NOTARY PUBLIC.**)

I understand that by signing this release I am agreeing to waive any non-disclosure rights I may have regarding any document or other information in any personnel file or other file maintained by any former employer, person or entity. This release authorizes the disclosure of any document or information relating to me in any way, regardless of the privacy information that it may contain.

I authorize Canyon County, Idaho Prosecuting Attorney's designee, an investigator representing Canyon County (hereinafter referred to as the investigator), to examine or copy any and all files maintained by any person or entity in regard to me and my employment with any person or entity.

I further authorize the investigator to interview any and all persons regarding any and all aspects of my employment history, background, and/or any other matter connected with or related to my employment history and/or other background information.

I, in exchange for allowing the investigator to examine or copy the above described documents and information, and/or allowing the investigator to interview the above described individuals do hereby, and for my heirs, executors, administrators, agents, employees, representatives, successors, insurers and assigns, release, acquit and forever discharge the Commissioners of Canyon County, Idaho, the Canyon County Sheriff, Canyon County, Idaho and all agents, employees, elected and appointed officers of Canyon County and all of those entities and those persons, employees, officers, representatives, attorneys, agents, insurers, successors and assigns and any and all other persons or entities acting for, by or through them, whether acting in their individual capacity or on behalf of said individuals or entities hereinafter collectively referred to as Canyon County from any liability or damage which may result from the examination or release of any records to, from the disclosure of information from, and/or from the conducting of an interview by, the investigator.

Further, I, in exchange for allowing to examine or copy the above described documents and information, and/or allowing the investigator to interview the above described individuals, do hereby, and for my heirs, executors, administrators, agents, employees, representatives, successors, insurers and assigns, release, acquit and forever discharge any person or entity who releases to, or allows the examination by, or participates in an interview with, the investigator, as authorized in this release, from any liability or damage which may result therefrom.

**The undersigned further declares and represents that no promise, inducement or agreement not herein** expressed has been made to the undersigned and that this agreement contains the entire agreement between \_\_\_\_\_ and Canyon County, Idaho. *(APPLICANTS PRINTED NAME)*

The undersigned further declares and represents that he/she fully understands the matters contained in this release and has had an opportunity to consult with his/her attorney regarding this release, prior to the signing thereof.



**CRIMINAL CONVICTION DISCLOSURE**

A background investigation may be conducted by Canyon County when reviewing applicants for law enforcement positions, positions in departments or offices that provide support to law enforcement or other positions where a criminal conviction may be relevant to the work. Criminal convictions will not be reviewed in the initial evaluations of applicants except where a conviction would disqualify an applicant from employment by law. The implications of a conviction may be assessed for a particular hiring decision including, but not limited to, the nature of a criminal conviction, its relationship to the job, and the amount of time that has passed since the crime was committed. A conviction does not necessarily preclude employment or disqualify an applicant from consideration; however, any misrepresentations, omissions, or falsifications will also be considered.

Have you ever been convicted of any offense against the law as an adult? If your answer is "yes," list details in the space provided below. Yes \_\_\_\_\_ No \_\_\_\_\_

Nature of conviction, date of conviction, location of conviction:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
Applicant Signature Last Name, First Name, Middle Initial  
(please print)

STATE OF \_\_\_\_\_ )  
ss.  
County of \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_, in the year 20 \_\_\_\_, before me \_\_\_\_\_  
(Notary's Name)

Personally appeared \_\_\_\_\_, and proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument, and acknowledge the he (she) executed the same.

Signature of Notary: \_\_\_\_\_  
Notary Public for: \_\_\_\_\_  
Residing at: \_\_\_\_\_ My Commission Expires: \_\_\_\_\_

## **Canyon County Sheriff's Office Employment Disqualifiers**

Listed below are a number of behaviors which **may** disqualify an applicant from consideration for employment.

### **Involvement with Illegal Drugs**

- Automatic disqualification for use of marijuana in the past three (3) years.
- Automatic disqualification for use of any other illegal drug in the past five (5) years.<sup>1</sup>
- Automatic disqualification for history of illegal drug use beyond the experimental level.<sup>1</sup>
- Unlawful prescription drug use in the past three (3) years.<sup>1</sup>
- Any use of injectable illicit drugs such as heroin.

### **Driving Record**

- Suspended license in the past ten (10) years.<sup>1</sup>
- Automatic disqualification for misdemeanor DUI conviction in the past two (2) years or two (2) or more in the past five (5) years.<sup>1</sup>
- One (1) or more misdemeanor DUI offenses in the past ten (10) years.<sup>1</sup>
- Five (5) or more moving traffic violations in the past three (3) years.<sup>1</sup>
- Driving Without Privileges (DWP) in the past two (2) years.
- Failure to provide proof of liability insurance in the past three (3) years.

### **Criminal Record**

- Automatic disqualification for conviction of felony crime unless under eighteen (18) and ten (10) or more years prior to application submittal.<sup>1</sup>
- Automatic disqualification for conviction of misdemeanor sex crime or crime of deceit within five (5) years of application submittal.<sup>1</sup>
  - o Willful concealment and petit theft convictions may be exception to five (5) year requirement.
- All other misdemeanor convictions within ten (10) years of application submittal.<sup>1</sup>
- Automatic disqualification of felony conviction for selling, transporting or manufacturing of illegal drugs.<sup>1</sup>

### **Note:**

- Some positions require a valid driver's license.
- Deputy Sheriff applicants must be at least twenty-one (21) years of age.
- All other applicants must be at least eighteen (18) years of age.
- Applicants must provide at a minimum, proof of either a high school diploma, G.E.D., and/or high school proficiency (equivalency) certificate.

### **TYPING TEST FOR LATERAL DISPATCHER/CALL TAKER AND CUSTOMER SERVICE SPECIALIST REQUIRED**

Applicants for Lateral Dispatcher, Dispatch Call Taker or Customer Service Specialist must submit a typing test with the application assuring typing proficiency of at least thirty (30) words per minute. Typing tests may be obtained on-line at: [www.typingtest.com](http://www.typingtest.com) or at Job Service.

<sup>1</sup>Requirement of the Idaho Peace Officer Standards & Training (POST) Council (IDAPA 11.11.01)