

**RELEASE FOR  
PRE-EMPLOYMENT BACKGROUND INFORMATION**

I, \_\_\_\_\_, agree and consent to allow the **Rosebud County Sheriff's Office** to conduct a background information check on me. I understand and agree the **INFORMATION ABOUT ME** will be used and shared internally by Rosebud County personnel and officials to evaluate me for employment with the Rosebud County Sheriff's Office.

Except as noted by crossing-out the item, I consent to background information research by Rosebud County knowing the research will include, but is not limited to, the following sources of information: **(CROSS-OUT ANY ITEM FOR WHICH CONSENT IS WITHHELD)**

Criminal History (including federal and multi-state criminal history records, and law enforcement and prosecution files)

Traffic/Driving Records and Reports

Juvenile Offense Records and Reports

Judicial Records of civil and criminal proceedings

Probation Records

Child and Family Services Information and Referrals

Current and former employers

References provided by the applicant

Other/Notes by applicant: \_\_\_\_\_

I consent and direct that any entity and/or person holding the information about me, except as expressly noted or withheld above, shall release the information to Rosebud County.

I further release and agree to hold-harmless these entities and persons who in good faith provide information about me to the Rosebud County Sheriff's Office based on this Release. I agree that I cannot and will not pursue any claim against the providers of information or against Rosebud County based an employment decision premised on background information provided or received in good faith.

I SO AGREED this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Signature \_\_\_\_\_

Printed Name \_\_\_\_\_

Maiden Name or Aliases \_\_\_\_\_

Date of Birth \_\_\_\_\_

Social Security Number \_\_\_\_\_

Driver License No. \_\_\_\_\_ State \_\_\_\_\_

This Release expires \_\_\_\_\_