PROB 11G (Rev. 5/03)

## **AUTHORIZATION TO RELEASE INFORMATION** (PRIVATE PERSON OR ORGANIZATION)

## TO PROBATION OFFICER

TO	WHOM	IT MA	Y CONCERN:

Ι,		, the un	dersigned, hereby authorize the		
		District of yee(s), bearing this release or copy thereof,	to obtain any information		
	Employment				
	Education Records (inclupersonal history, and disc	acluding, but not limited to academic achievement, attendance, athletic, disciplinary records)			
	Medical Records				
	Psychological and Psych	iatric Records			
		h information upon request of the bearer. nformation is for the United States Probatio			
I hereby release you, as custodian of such records, any school, college, or university, or other educational institution; hospital or other repository of medical records; social service agency; any employer or retail business establishment, including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind which may at any time result to me, my heirs, family, or associates because of compliance with this authorization and request for information or any other attempt to comply with it.					
supervision, a	at which time this authorized pursuant to this authorized.	nation, I understand that this authorizationation to use or disclose this information experization may be disclosed by the recipient and the second s	pires. I understand that information		
		ation, I understand that I have the right to re ification to the program's privacy contact at			
		(Name and Address of Program)	·		
information, revoking this program will	I will thereby revoke my authorization before I sa	ation, I understand that if I revoke this authorization to further disclosure of such attisfy the condition of my supervision that My revocation of authorization under such enviction supervision.	information. I also understand that t requires me to participate in the		
(Authorizing S	ignature - Full Name)	(Full Name - Printed or Typed)	(Date)		
WIT	NESS —				
		(Probation Officer)	(Date)		