



**Fon du Lac Park District Police Department  
305 Springfield Rd.  
East Peoria, Illinois 61611**



Dale E. Orr  
Chief of Police

**CONSENT AND RELEASE FOR BACKGROUND INVESTIGATION**

**Acknowledgment of Consent**

I, \_\_\_\_\_, acknowledge that I am seeking employment in a safety-sensitive field and that establishing my employment eligibility requires a thorough investigation into my background and character.

Furthermore, I acknowledge and agree that as a condition of being considered for employment with the Fon du Lac Park District Police Department, or for maintaining my continued employment with the employer, it is required that I consent to a complete and thorough investigation of my background to determine whether I am a suitable candidate for the position of Police Officer with the requesting law enforcement agency (hereinafter "employer").

**MANDATORY BACKGROUND INVESTIGATION:**

I authorize the employer and / or their designated contractor to conduct a background investigation of me, which shall include, but shall not be limited to,

1. A review of my complete employment history
2. A review of my complete criminal history
3. A review of my driving records
4. A background check with the Department of Children and Family Services
5. Interviews with my personal references
6. A review of all internal investigation files from any previous or current employers.
7. A verification of academic credentials and licenses
8. A review of my military service history, if any
9. A review of the Illinois Law Enforcement Training Standards Board's records and Officer Professional Conduct Database

**CREDIT CHECK**

I hereby consent to the employer obtaining and reviewing any credit and consumer reports, as permitted under the federal Fair Credit Reporting Act and local or state credit privacy laws, if applicable. I understand that the Fair Credit Reporting Act, 15U.S.C. 1681, et seq., authorizes me to request a copy of any consumer credit report from the consumer reporting agency that compiled the report.

**CONSENT TO RELEASE OF INFORMATION**

I hereby consent to the release of all employment records from my current and former employers, including, but not limited to:



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1. Job applications
2. Personnel files
3. Internal investigations
4. Separation Agreements
5. Pre-employment evaluations
6. Tests
7. Questionnaires
8. Fitness for duty examinations
9. Any other information obtained about me by the entity to whom this Consent is presented

#### CONSENT TO REQUIRED INTERVIEWS AND EVALUATIONS

I further agree to participate in a personal interview, testing process, polygraph examination, post-offer psychological evaluation and medical evaluation, or any combination of those examinations or tests, as determined by the employer.

#### CONFIDENTIALITY

All information obtained by the employer under this background investigation shall be confidential and safeguarded against disclosure to all unauthorized persons as required by law. However, nothing prevents the employer from using the information obtained to evaluate my suitability for employment.

I specifically consent to the disclosure of information that may be covered by a settlement agreement or other confidentiality provision entered with my former employers, and I waive any rights to enforce any prior confidentiality agreement against my former employer about this disclosure.

#### WAIVER OF PRIVACY

I waive any right or claim to privacy in such information and consent to the disclosure of information that may be exempt from disclosure by law. I waive any right I may have to be notified by any individuals and organizations named in my application for employment before the release of any information to the employer, including the release of information concerning any disciplinary action taken against me by former employers.

#### INDEMNIFICATION

In exchange for this release of all of my personnel information, I agree to release, discharge and hold harmless any person, firm, or entity and their employees and agents that disclose information in response to the receipt of this consent, from any liability for all claims, liabilities, causes of action, known or unknown, fixed or contingent, that arise from or that are in any manner connected to the disclosure of any personal information as described above. I further release and hold harmless the employer and the employer's respective personnel, employees, and agents from and liability resulting from the or in connection with, the results of this background investigation concerning my fitness for employment or



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continued employment at the employer or the decision to hire me not to hire me or retain me in my position.

**SIGNATURE**

I agree to sign this document and certify that I have read, understand, and agree to the terms and conditions set forth in this document and that this is a complete waiver under Section 10 of Employment Record Disclosure Act.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Date of Signature: \_\_\_\_\_

