



AUTHORIZATION TO RELEASE INFORMATION

I, _____, authorize you,

_____ to release any
(Please type or print name of current or most recent employer)

and all information concerning me to a representative of the Archdiocese of San Francisco for the purpose of assisting the Archdiocese of San Francisco in determining my qualifications for employment. I further authorize your representative to answer fully and honestly any questions posed orally or in writing concerning me by any representative of the Archdiocese of San Francisco.

In exchange for your full and honest disclosure of information, I hereby release any and all claims I may have against you or your agents for statements they make to the Archdiocese in response to its inquiries.

Signature

Type or print name

Date