



The City of New York  
Department of Investigation  
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**AUTHORIZATION FOR RELEASE OF INFORMATION  
PURSUANT TO A BACKGROUND INVESTIGATION  
BY THE NEW YORK CITY DEPARTMENT OF INVESTIGATION**

In connection with a background investigation conducted by the New York City Department of Investigation (DOI), I consent to and authorize the disclosure of all information DOI deems relevant to the evaluation of my eligibility to hold a position of public trust.

I authorize the disclosure of information to DOI, including but not limited to files and records maintained by present and past employers, educational institutions, government bodies, and by investigative, licensing, disciplinary, or grievance bodies.

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Signature

State of \_\_\_\_\_

County of \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public or Commissioner of Deeds