



SENIOR RESOURCE DEVELOPMENT AGENCY  
PUEBLO, INC.

230 N. Union Avenue · Pueblo, CO 81003 · (719) 545-8900 · Fax (719) 544-7831  
www. srda.org

**AUTHORIZATION AND CONSENT TO RELEASE INFORMATION**

I, \_\_\_\_\_, whose social security number is \_\_\_\_\_, and whose birth date is \_\_\_\_\_ represent and acknowledge that as an employee or volunteer of the Senior Resource Development Agency, Pueblo, Inc. (S.R.D.A.): I may provide services to and be in contact with individuals in situations in which their trust is placed in me and that I am not to take advantage of that trust; I may provide services where my skill are important in providing safe service; I have no history of safety violations or violations of the law which may affect my ability or my employability to provide the services for which I am employed by or volunteering to S.R.D.A.; and, I authorize S.R.D.A. to conduct such investigations into my personal background, and criminal history as S.R.D.A. may deem necessary to allow S.R.D.A. to employ me or to use my volunteer services provided under the S.R.D.A. umbrella of services.

Therefore, I authorize any individual, person, corporation, law enforcement agency or other entity having any information about me to release to S.R.D.A. or its authorized agent, any and all such information about me which such individual, person, corporation, law enforcement agency or other entity may have in their possession or under their control.

On behalf of myself, my personal representative, heirs, successors, assigns, business partners or others claiming by, through or under me, I hereby release any individual, person, corporation, law enforcement agency or other entity who provides such information about me to S.R.D.A., from any and all liability of any kind whatsoever, which might arise as a result of the disclosure of such information.

A photocopy of this signed Authorization and Consent to Release Information shall have the full force and effect as the original.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.  
(Day) (Month) (Year)

\_\_\_\_\_

Signature

\_\_\_\_\_

Printed Name