

WAIVER OF LIABILITY AND AUTHORIZATION TO RELEASE INFORMATION

TO LAS VEGAS METROPOLITAN POLICE DEPARTMENT:

I, _____, hereby authorize you to furnish the
_____ any and all information concerning
my employment with LAS VEGAS METROPOLITAN POLICE DEPARTMENT, any information,
background investigation information, psychological and polygraph test results (pass or fail only),
that was obtained as a result of my application for employment with the LAS VEGAS
METROPOLITAN POLICE DEPARTMENT. Information of a confidential or privileged nature
may be included.

FURTHERMORE, I hereby release LAS VEGAS METROPOLITAN POLICE DEPARTMENT of
Any and all liability or damage which may result by furnishing the information requested by the
above-named organization on my behalf.

DATED this ____ day of _____, _____.

(Signature)

Subscribed and sworn before me this ____ day of _____, _____.

Notary Public, in and for

County of _____ State of _____