



MIAMI COUNTY SHERIFF'S OFFICE

201 W. MAIN ST., TROY, OH 45373

(937) 440-6085

DAVE DUCHAK, SHERIFF

Name:

Address:

SSN:

DOB:

Employed by you as:

From:

To:

The above captioned individual has applied for a position within the Miami County Sheriff's Office and states that he/she was employed by your firm of agency in the position and within the time frames referenced above.

You can assist the Miami County Sheriff's Office in its effort to appoint competent personnel of good character if you will furnish the information requested in this letter. All information supplied will be treated with strict confidence, and to further indemnify your firm or agency, the applicant has executed a "Permission for the Release of Information Waiver" directly below.

Your cooperation and prompt reply will be greatly appreciated.

Sincerely,

Dave Duchak
Miami County Sheriff

I hereby give my permission for authorized agents of the Miami County Sheriff's Office to conduct an investigation of my background, including education, employment, credit, reputation, military records, sick leave usage, and any other factors which such agents may deem proper and necessary in connection with my application _____ with for the position of the Miami County Sheriff's Office.

I give my permission for any person, business or institution contacted in the course of such investigation to release any and all information properly requested and Photostats of same if requested, and do hereby release such person, business or institution from all liability for providing correct information.

Signature: _____

Print/type Name: _____ DOB: _____ SSN: _____

In Presence of Witness _____ (Signature and Title)

_____ (Print Name and Title)