



Yellowstone County

Public Works
P.O. Box 35024
Billings, MT 59107

AUTHORIZATION TO RELEASE INFORMATION Driving Record

I am an applicant for a position with the Yellowstone County Public Works Department.
(Road & Bridge Department, Junk Vehicle Department or Weed Department)

As such, I am required to furnish information which Yellowstone County will use to determine my qualifications and suitability for employment. This information will include a background check concerning my driving record, conducted by local law enforcement in order to determine my qualification to legally operate a motor vehicle during my term of employment. I understand that my failure to possess and to maintain a valid Montana Drivers License at all times during my employment with Yellowstone County will result in immediate termination from employment with the Yellowstone County.

In this connection, I hereby expressly authorize the release of any and all driver history records which you may have concerning me, including information of a confidential or privileged nature.

I hereby release Yellowstone County and any organization, company, institution or person furnishing information to Yellowstone County, as expressly authorized above, from any and all liability for damage, which may result from furnishing the information requested.

Signature _____

Date _____, 20____

Print Full Name: _____

Any Other Name Used: _____

Present Address: _____

City State Zip

Social Security Number _____

Birth Date _____

Place of Birth _____

City State

Mail to: Yellowstone County Public Works, PO Box 35024, Billings, MT, 59107