

Last Name

NAME:

MICHAEL G. BELLOTTI NORFOLK COUNTY SHERIFF

200 West Street, Dedham Massachusetts 02027 | Ph: 781.751.3326

Middle

NORFOLK SHERIFF'S OFFICE CITIZENS ACADEMY

AUTHORIZATION FOR BACKGROUND CHECK AND LIABILITY WAIVER

First Name

ADDRESS:			
-	Number	Street	Apt
_	City	State	Zip
HOME PHONE:		CE	ELL PHONE:
EMAIL:			
DATE OF BIRTH:SOCIAL SECURITY NUMBER:			
IMPORTANT NOTICE: A criminal/background check will be conducted for each participant. By signing below you hereby grant the NSO authority to conduct a criminal/background check. The findings will be for NSO Citizen's Academy purposes ONLY and will be kept confidential. ALSO: By signing below, you hereby release and hold harmless the Norfolk Sheriff's Office, its' employees, and the Commonwealth of Massachusetts from any injury or illness, and medical or transportation costs. Furthermore, by signing below you grant the NSO permission to use and publicize your photograph and/ or videos of you while attending the Academy.			
Signature Date			Date