

AUTHORIZATION AND RELEASE

I, _____, born on _____, in _____,
(Print Name) (Date) (City) (State)

having filed an application for _____ with the City of Medina and/or Medina City Schools, consent to have an investigation made as to my moral character, professional reputation, and fitness for holding the above mentioned position and such information as may be received reported to the admitting authority. I agree to give any further information that may be required in reference to my past record.

I also authorize and request every person, firm, company, corporation, governmental agency, court, association, or institution having control of any documents, records, or files regarding charges or complaints filed against me, formal or informal, pending or closed, or any other pertinent data, and to permit the City of Medina or any of its agents or officers to inspect and make copies of such documents, records, and other information.

I hereby release, discharge, and exonerate the City of Medina, Medina City Schools and Medina Civil Service Commission, its agents and officers, the admission agency of the above jurisdiction, its agents and representatives, and any person so furnishing information from any and all liability of every nature and kind arising out of the furnishing inspection of such documents, records, and other information or the investigation made by the City of Medina.

PRE-EMPLOYMENT STATEMENT

I consent to taking physical examinations as may be required by the City of Medina.

I agree to participate in screening for substance abuse at a City-designated site and recognize that, if tests show the presence of illegal drugs, I will no longer be considered for employment with the City of Medina.

I understand that I could be responsible to cover the cost to have a background check completed through the Ohio Bureau of Criminal Identification & Investigation by means of fingerprinting if offered employment with the City of Medina.

I am aware that results of any physical examinations or drug screens will be released to the City of Medina.

I understand that if I am hired for a position that involves driving Medina City vehicles I must possess and maintain a valid State of Ohio driver's license and remain insurable under the City of Medina's vehicle insurance plan and will be subject to spot checks regarding same.

I HAVE READ THE FOREGOING DOCUMENT AND UNDERSTAND IT AND GIVE CONSENT BY MY SIGNATURE BELOW.

(Date)

(Signature of Applicant)