

**ROY COOPER**

**GOVERNOR**

**STATE BUREAU OF INVESTIGATION**

**3320 Garner Road**

**P.O. BOX 29500**

**Raleigh, NC 27626-0500**

**(919) 662-4500**

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**NORTH CAROLINA**

 **ROBERT SCHURMEIER**

**DIRECTOR**

**SBI COLLEGE INTERN AUTHORIZATION AND RELEASE FORM**

**TO WHOM IT MAY CONCERN:**

I, , SSN (last four digits) ,

PR INT Last Name First M iddle M aiden

have applied for a college internship position with the North Carolina State Bureau of Investigation (SBI) and hereby consent to a background investigation. I am aware that the investigation will consist of a name, driver’s license, and fingerprint card criminal history check in the North Carolina state files and the FBI national files.

I hereby authorize and request any person having control of any documents including, but not limited to: criminal and court records that pertain to me, to furnish such documents to the SBI. I understand that the investigative process requires the SBI to receive and release my social security account number for the purpose of assessing or verifying pertinent information, and I authorize such receipt and release. I understand that I will not receive, and am not entitled to, a copy of the report or to know its contents.

This authorization shall serve as a release of liability to all parties furnishing such information during the background investigation conducted by the SBI. A photocopy of this release shall be considered as effective and binding as the original hand-executed copy.

 College Intern Signature Date

State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

County of \_\_\_\_\_\_\_\_\_\_\_\_

Sworn to and subscribed before me this day of , 20 .

Signature of Notary Public

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Notary Seal)