



P.O. Box 889, Friday Harbor, WA 98250 * 360-378-2688 * fax 360-378-6114 * <http://www/portfridayharbor.org>
Commissioners: Mike Ahrenius * Greg Hertel * Barbara Marrett

AUTHORIZATION FOR RELEASE OF INFORMATION

I, _____ authorize permission to the
Port of Friday Harbor to run a full background check including any criminal record for
the purpose of pre-employment screening.

Full Name: _____

Other Names Used: _____

Drivers License #: _____ State _____

Social Security Number: _____

Date of Birth: (optional) _____

Current Street Address: _____

City, State, Zip: _____

Previous Street Address: _____

City, State, Zip: _____

Signature: _____

Date: _____