

**OZARK MOUNTAIN MEDIA GROUP**  
**Public and Private Record Release**  
**Motor Vehicle & Criminal Background Information**

State and Federal privacy laws protect and prescribe restrictions regarding access to certain confidential and personal information. This form authorizes the release of motor vehicle and criminal background information to the Organization named below for employment or insurance eligibility purposes.

By signing below: I authorize Organization to investigate and review driving, motor vehicle, criminal histories and related information periodically the duration of my employment or insurance relationship with the Organization; I understand that my employment or insurance eligibility is contingent upon the Organization review of such information; and I confirm that I have read and understand the attached Disclosure Statement.

Organization (Employer or Insurer): Ozark Mountain Media Group

Social Security Number (for Criminal Records only):

Driver License Number

State

Birth Date (MM/DD/YR):

Circle Gender: M or F

Printed Name (as it appears on driver license)

Signature Date: