

**COMMAND INVESTIGATIONS DIVISION  
NAVAL AIR FACILITY ATSUGI, JAPAN  
AUTHORITY FOR RELEASE OF INFORMATION AND RECORDS**

In accordance with privacy act of 1974, I have been advised that certain information is required to assist the Human Resource Satellite Office, NAF Atsugi, Japan in making a security determination concerning myself and that execution of this form is completely voluntary.

I hereby authorize and consent to the release of information and records bearing on my personal history, arrest and convictions, if any, to special agents of the Department of Defense. The information will be used for the purpose of determining my suitability for employment.

This authorization is valid for six (6) months after signing. Upon request, a copy of this signed statement may be furnished to the present or former employer, criminal justice agency, or other person furnishing such information or record.

\_\_\_\_\_  
Name (Last, First, Middle)

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Place of Birth

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date