



# ***CUMBERLAND POLICE DEPARTMENT***

"Working Together to Build a Safer Community"



John R. Desmarais  
Chief of Police

## **PERSONAL INQUIRY WAIVER**

To Whom it May Concern

I respectfully request and hereby authorize you to furnish the Cumberland Police Department any and all information or opinions as may be requested which you may have concerning me; including, but not limited to: my work record, my academic record, my reputation, my financial and credit status. Please include any and all medical, physical and mental records or reports, including all information of a confidential nature. This information is to be used to assist the department in determining my qualifications, suitability and fitness for the position which I am seeking.

NAME: \_\_\_\_\_  
(PRINT OR TYPE)

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

WITNESS: \_\_\_\_\_

WITNESS SIGNATURE: \_\_\_\_\_

THIS FORM MUST BE SUBMITTED  
PRIOR TO ORIENTATION OR AT THE TIME OF ORIENTATION

"A NATIONALLY ACCREDITED AGENCY"