



**IN THE TRIBAL COURT
PUEBLO OF POJOAQUE
STATE OF NEW MEXICO**

FILED
PUEBLO OF POJOAQUE TRIBAL
COURT

DATE: _____

COURT CLERK

Name: _____

Address: _____

SSN#: _____

DOB: _____

Phone Number: _____

Tribal Affiliation: _____

I, _____ being duly sworn upon oath, do hereby authorize the Pueblo of Pojoaque Tribal Court to release information to the following individual and/ or agencies:

Self (Specify): _____
(Local and or out-of-state)

School (Specify): _____
(Local and or out-of-state)

Employer (specify): _____
(Local and or out-of-state)

Service Agencies (Specify): _____
(Local and or out-of-state)

I authorize the Pueblo of Pojoaque Tribal Court to release information to the above for purpose of employment and or other specified purpose. I hereby waive any rights of confidentiality in this regard. I understand that by signing this authorization, a criminal history check will be performed, and information will be released to the agency. Employer indicated above. I under that this information may contain records of arrest, listings of charges, resulting sentences and final disposition. I authorize the release of this type of information, even though this record may be designated as "confidential" or "nonpublic" under the provisions of state or federal law.

Signature

Date

Record

Criminal Record
(See Attached)

Traffic Citation
(See Attached)

Investigation conducted by the following: Court Clerk/Court Administrator, I/ Court Administrator or Other official designee

Completed by: _____ Title: _____ Date: _____