

Village of Mount Prospect



PSEBA General Information Release

I hereby authorize the Village of Mount Prospect's workmen's compensation carrier, the Board of Fire and Police Commissioners, and any other institution(s) with which the Village deems necessary to contact, to release to the Village of Mount Prospect and/or its representatives any records which relate in any way to my ability to perform the essential duties of a _____ with the Village as well as my eligibility for benefits under the Public Safety Employee Benefits Act. The above-described records and information should be released to Village Manager Michael Janonis of the Village of Mount Prospect, or any other authorized Village representative.

This request specifically includes the release of any records relevant to the Village, so that the Village may assess my qualification for benefits under the Public Safety Employee Benefits Act. I understand that if I refuse to consent to disclose these records, the Village may proceed with determining my eligibility for benefits under the Public Safety Employee Benefits Act based on only what information it has currently. This consent will expire one year from the date next to my signature, unless I revoke it earlier, in writing, signed by a witness. I understand any such revocation will not be effective until delivered to the Village's Worker's Compensation carrier, the Board of Police and Fire Commission, and any other institution(s) with which they are affiliated and will not affect any prior release of information. I understand I may ask to inspect and/or copy the records that are being released.

Name of Applicant (please print)

Signature of Applicant

Date

Name of Witness (please print)

Signature of Witness

Date