

CITY OF EUGENE

RELEASE FROM LIABILITY

Volunteer Name: _____
 First Middle Last

RELEASE FROM LIABILITY: This release is completed and signed by the volunteer. If this release is not completed and signed, or, if the volunteer marks the NO box, reference information CANNOT be given to prospective employers unless an acceptable, subsequent release has been received by the City

- YES. I authorize the City of Eugene and its agents to furnish any prospective employer reference information concerning my volunteer record, work performance, work conduct and reasons for termination. Information of a confidential or privileged nature may be included. I hereby release the City of Eugene and its agents from any liability or damage which may result from furnishing the information requested.**

- NO. I have read the above statement and do not wish to authorize the release of such information.**

Volunteer Signature & Date

Witness Signature & Date