

## AUTHORIZATION FOR THE RELEASE OF CONFIDENTIAL INFORMATION

I, the undersigned, do hereby attest that I have never been convicted of any offense related to the abuse of children or of violent or assaultive behavior.

I understand it will be necessary for Try-Again Homes Incorporated to investigate my character references. I hereby give my consent for this information exchange and authorize such agencies to release any information requested by Try-Again Homes Incorporated. I understand that the agencies to be contacted will be employers, courts (juvenile and adult), local/state law enforcement or district magistrates, social services, and any other persons or agencies with home I have had contact with.

\*\*\*Failure to report charges/convictions will result in immediate rejection/closure of your home by this agency. \*\*\*

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

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(Applicant Signature)

YOUR APPLICATION CANNOT BE PROCESSED WITHOUT THE ABOVE INFORMATION

Try-Again Homes, Inc.  
103 Euclid Drive  
Parkersburg, WV 26104