SALT RIVER PIMA-MARICOPA INDIAN COMMUNITY COURT

10,005 East Osborn, Scottsdale, Arizona 85256-9722 (480)850-8116

STATE OF ARIZONA)
) ss.
COUNTY OF _____)

AUTHORIZATION AND RELEASE

I, (full name) _____, as part of my application for admission to the Salt River Pima-Maricopa Indian Community Court, consent to have an investigation made as to my moral character, professional reputation, and fitness for the practice of law and such other information as may be received, all of which will be reported only to the Salt River Pima-Maricopa Indian Community Court. I agree to give any further information which may be required concerning my past record. I understand that such information is confidential.

I also authorize and request every person, firm, company, corporation, governmental agency, law enforcement agency, court association or institution having control of any documents, reports or other information pertaining to me, to furnish to the Salt River Pima-Maricopa Indian Community Court any such information including documents, records, bar association files regarding charges or complaints, formal or informal, pending or closed, or any other permanent data and to permit the Salt River Pima-Maricopa Indian Community Court or any of its agents or representatives to inspect and make copies of such documents, records or other information.

This consent does not apply to matters communicated by me in confidence to any lawyer, spouse, physician, psychiatrist or clergyman.

I hereby release, discharge and exonerate the Salt River Pima-Maricopa Indian Community Court, its agents and representatives and any person so furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents, records, or other information or the investigation made by the Salt River Pima-Maricopa Indian Community Court.

_____
Signature of Applicant

Subscribed and sworn before me on this ___ day of _____, 20____.

_____
Notary Public My commission expires: _____

[S E A L]