



UNITED STATES
OFFICE OF PERSONNEL MANAGEMENT
OFFICE OF FEDERAL INVESTIGATIONS



SPECIFIC RELEASE

I, _____, hereby authorize any Federal Investigator, Special Agent or duly accredited representative of the U.S. Office of Personnel Management (OPM), or other Federal investigative agency bearing this release, or a copy thereof, to obtain the information identified below pertaining to me which is maintained by the person or organization specified below:

PERSON OR ORGANIZATION: _____

ADDRESS: _____

The information to be released is as follows:

MEDICAL (May include, but not limited to: dates of confinement; participation or treatment; diagnosis; doctors' orders; medication sheets; urine result reports; attendance sheets; prognosis and medical opinions regarding my health, recovery and/or rehabilitation; as well as any other information indicated below):

I am aware that the information released by the above named person or organization may, but not necessarily, contain data pertaining to my use and/or abuse of alcohol and/or drugs, and my participation in a rehabilitation program with the above named organization.

OTHER (Specify):

The execution of this release is voluntary on my part, and is made without duress or promise on the part of OPM or other Federal investigative agency. I am aware that this release is valid only when presented to the addressee within 3 months from the date of its execution by me to obtain financial records (as defined by the Right to Financial Privacy Act) and has no expiration date for other purposes.

I have read and fully understand the Privacy Statement on the back of this form. I understand the purpose for which the information to be released is required as described in the Privacy Statement. I hereby release any individual, including record custodians, from any and all liability for damages of whatever kind or nature which may at any time result to me on account of compliance, or any attempts to comply, with this authorization. I consent to the release of any and all financial information obtained with this release to any Federal agency that requests it, consistent with the conditions of its collection under the Right to Financial Privacy Act, for employment suitability or security clearance purposes.

Signature (Full Name)	Social Security Number	Area Code and Telephone Number	Date (Month, Day, Year)
Current Address (Street, City, State, Zip)		Signature of Parent/Guardian (As Required)	

PRIVACY STATEMENT

(Pursuant to the Privacy Act of 1974 and the
Right to Financial Privacy Act of 1978)

ALL INFORMATION AND RECORDS:

Authority for Collecting Information

Solicitation of this information is authorized by: Sections 1303 (Investigations), 1304 (Loyalty Investigations), and 3301 (Suitability), of Title 5, United States Code; Section 2165 (Contractor Investigations), of Title 42, United States Code; Executive Order 10450 (Security Requirements for Government Employment); Rule V (Regulations, Investigation, and Enforcement) of Title 5, Code of Federal Regulations; and Parts 731 (Suitability), 732 (Personnel Security) and 736 (investigations), of Title 5, Code of Federal Regulations.

Purposes and Uses

Information provided by you on this form will be furnished to the addressee in order to obtain information concerning your activities in connection with an investigation to determine your (1) fitness for Federal employment, (2) clearance to perform contractual service for the Federal government, (3) security clearance or access. The information obtained may be furnished to Federal agencies for the above purposes and in fulfillment of official responsibilities to the extent that such disclosure is permitted by law.

Consent to Release and Effects of Nondisclosure

Your consent is voluntary and, in the case of financial records, may be revoked at any time before the information is released. In the case of financial records maintained at a financial institution (as defined by the Right to Financial Privacy Act), your consent is not required as a condition of doing business with any financial institution. **If you do not provide your consent, however, the Office of Personnel Management or other authorized Federal investigative agency will not be able to obtain the requested data.** Consequently, failure to furnish all or part of the information requested of you on the form may result in discontinuance of the investigation, and a lack of further consideration for employment, clearance or access, or in the termination of your employment.

RECORDS COVERED BY THE RIGHT TO FINANCIAL PRIVACY ACT:

Access by Federal Agencies Without Your Consent

The Right to Financial Privacy Act permits financial institutions to disclose your financial records to Federal agencies under certain conditions without your consent. Such disclosure is ordinarily made only in response to a lawful subpoena, summons, formal written request, or search warrant. Generally, the Federal agency must give you advance notice, explaining why the information is sought and telling you how to object in court. The Federal agency must also send you copies of court documents to be prepared by you with instructions for filling them out.

Records of Disclosures to Federal Agencies

Financial institutions are required to maintain a record of disclosure of financial data to Government authorities. Upon request, financial institutions must provide you with a copy of any record of their disclosure of your financial records to a Government authority, including the identity of the Government authority to which disclosure was made, unless the authority has obtained a court order delaying such a notice.

Transfer of Information by a Federal Authority

Generally, a Federal agency must tell you if any financial records pertaining to you, which were obtained from a "financial institution," are transferred to another Federal agency without your consent.

Penalties

If a Federal agency or financial institution violates the Right to Financial Privacy Act, you may sue for damages or to seek compliance with the law. If your suit is successful, you may be repaid your attorney's fees and costs.