



Download and save this form before completing. Once completed, print the form to sign it and to complete the notary requirements.

AUTHORIZATION TO RELEASE INFORMATION

Name: _____

Date: _____

Date of Birth: _____
mm/dd/yyyy

Office Phone #: _____

Cell Phone #: _____

I request and authorize the Utah Fire Service Certification Council to release test scores of the person named above to:

Primary Department: _____

Address: _____

City: _____ State: _____ Zip Code: _____

This request and authorization applies to the following levels of state certification testing:

_____	_____
_____	_____
_____	_____
_____	_____

If completing this form electronically, check the box to the left to imply signature and agreement. Otherwise, print the form, complete it, sign it, and return to the UFRA Certification Office.

Signature: _____ Date: _____

STATE OF UTAH, COUNTY OF _____, as: _____

This instrument was acknowledged before me on this _____ day of _____, _____

by _____.

Notary Public

THIS AUTHORIZATION EXPIRES NINETY DAYS AFTER IT IS SIGNED.