

RELEASE AND AGREEMENT

I understand and agree to the following:

Pathway may make an investigation of my entire work and personal history and may verify all data in my application to become a Foster Caregiver. The investigation may include verification of all data in the application, related papers, oral interviews and police records on the internet. I authorize such investigation and the giving and receiving of any information requested by Pathway and I release from liability any person giving or receiving any such information. I understand that the discovery of derogatory information pertaining to my character, work history, education background, or other factors during the course of this investigation may prevent my home from being licensed as a foster home.

Pathway may release to _____
any information obtained during this licensing process, including, but not limited to, the Ohio Department of Job and Family Services Home Study and Narrative, and the fingerprint card.

I have read and agree to the above. A copy of this document may be used as the original.

DATE: __/__/__ SIGNATURE: _____

DATE: __/__/__ SIGNATURE: _____

Revised 1/24/05