

## AUTHORIZATION FOR RELEASE/CLOSURE OF PERSONAL INFORMATION

<b>Name</b>	<b>Employee Number</b>	
<b>Date of Hire</b>	<b>Date of Termination</b>	
<p>The Texas Public Information Act allows employees, officials, and former employees and officials to elect whether to keep their personal information confidential. Unless you choose to keep it confidential, the following information may be subject to public release if requested under the Texas Public Information Act. Therefore, please indicate whether you wish to allow public release of the following information.</p> <p>This form should be completed and signed by the employee no later than the 14th day after the date the employee begins employment, the public official is elected or appointed, or a former employee or official ends employment or service. An employee may submit a written request after these time periods, but the request will not apply to a records request made before the option was exercised.</p>		
<b>Allow Public Access</b>		
All personal information listed below	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Home Address	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Personal E-mail Address	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Home Phone Number	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Personal Cell Phone Number	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Social Security Number	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Emergency Contact Information	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Information that reveals whether you have family members	No <input type="checkbox"/>	Yes <input type="checkbox"/>
<b>Employee Signature</b>	<b>Date</b>	