



RUTGERS-NEW BRUNSWICK

Office for Violence Prevention
and Victim Assistance

Division of Student Affairs

Office for Violence Prevention
and Victim Assistance
Rutgers-The State University
of New Jersey
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New Brunswick, NJ 08901

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VPVA Volunteer Crisis Response Advocate

RELEASE AUTHORIZATION

To: All Courts, Probation Departments, Selective Service Boards,
Employers, Educational and other Institutions and Agencies without exception

I, _____, am making application for
appointment to the **Rutgers University VPVA Crisis Response Advocate program**.
As a result, an investigation is being conducted to determine my eligibility.

Therefore, you are **authorized to release** to the **Rutgers University Police Department** or **The Rutgers University Office for Violence Prevention and Victim Assistance** any and all information, documentary or otherwise pertaining to me that they may request.

A photocopy of this authorization will be considered as effective and valid as the original.

Signature

Date

Date of Birth

Social Security Number