



"It Takes A Village"

### CONSENT TO RELEASE AGENCY TRANSFER

Family Name: \_\_\_\_\_

I give my consent to \_\_\_\_\_ to disclose information from my files to Credence Village, Inc. for the purpose of Transfer of License.

I understand that information will be disclosed for the purpose(s) noted above, and that the information released will be limited to the following kinds of information.

- 1) Compliance/Investigations with Minimum Standards History
- 2) Serious Incidents; abuse or neglect and/or complaint investigations
- 3) Quarterly Evaluations
- 4) Training records
- 5) Home Study
- 6) Home Inspections
- 7) Weapons Inventory
- 8) Other relevant information

This consent may be revoked at any time by notifying Credence Village in writing. It may also be revoked by specifying a date, time, event, or condition upon which your consent will expire (if so, please specify: \_\_\_\_\_). In any event, this consent will expire within 90 days of the date signed.

My signature indicates that I understand the content of this form and that Credence Village, Inc. has, in no way, solicited my interest in transferring my license to Credence Village, Inc.

\_\_\_\_\_  
Print Name(s)

\_\_\_\_\_  
Signature(s)

\_\_\_\_\_  
Date

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#### CV Office Use Only

Sent To: \_\_\_\_\_

Date Request Sent: \_\_\_\_\_

Date Info received: \_\_\_\_\_