

Appellate Judicial Commission
Authorization for Release of and Certification of Accuracy of Information
for the Judge Sheffield Vacancy
Missouri Court of Appeals

(Do NOT use an “/s/” electronic signature. You must actually sign this form.)

By my signature on this form, I certify that all statements made in my application and attachments thereto are correct and that if I am selected by the commission and appointed to the office for which I seek appointment, I will accept the appointment, qualify, and promptly enter upon the performance of the duties of that office as provided by law.

By my signature to this form, I further authorize: (1) the commission by its chairperson to obtain relevant information, including but not limited to documents, records, and files about me from educational, law enforcement and disciplinary authorities and from employers and others who may have control of any documents, records, or other information pertaining to my application and suitability for the appointment I am seeking, and (2) the commission and its members to make such additional inquiries and to receive and share amongst themselves such additional information they shall deem appropriate in determining my qualifications for the position for which I seek appointment and the accuracy of my responses to the questions in this application and in otherwise fulfilling its duties. The information obtained under (1) and (2) above shall be made available only to the members of the Appellate Judicial Commission and their staff as necessary to perform their duties.

Notwithstanding the above, by my signature on this form, and in accordance with Supreme Court Rule 10, if I am one of the three nominees listed on the certificate of nomination sent to the governor, I authorize the commission to: (1) send a complete copy of this application and attachments to the governor, and (2) publicly release a copy of the application and attachments, so as to inform the public as to my qualifications for the position for which I am applying, and thereby waive any objections and rights I have with reference to the privacy of all information contained in the answers and attachments to this form, with the exception of the cover page (which contains personal and confidential identifying addresses, telephone numbers and similar information).

This authorization shall remain in full force and effect until revoked by me in writing.

By: _____

Dated: _____