



**NAVAJO POLICE DEPARTMENT**  
**INFORMATION MANAGEMENT SECTION**  
 POST OFFICE BOX 3360, WINDOW ROCK, NAVAJO NATION, AZ 86515  
 WEBSITE: www.ims.navajo-nsn.gov PHONE: (928) 357-6210



**CRIMINAL/TRAFFIC HISTORY RECORD (CTHR)**  
**RELEASE OF AUTHORIZATION**

UPDATED 10/23/24

I, \_\_\_\_\_, hereby authorize the release of my Criminal/Traffic History Record to \_\_\_\_\_ for \_\_\_\_\_ purposes.  
(Department / Company / etc.) (Employment / Housing / Personal Use)

My contact number is \_\_\_\_\_ if you have any questions.

If applicable:

Mailing Address of Recipient: \_\_\_\_\_  
MAILING ADDRESS CITY STATE ZIP CODE

Attention to: \_\_\_\_\_ Title: \_\_\_\_\_

***NOTE: Original will be mailed to ONE address unless \$1.06 Money Order is received. Mailing Address MUST BE written out.***

\_\_\_\_\_

**Signature**

\_\_\_\_\_

**Date**