

The North Carolina Center on Actual Innocence

PO Box 52446, Shannon Plaza Station, Durham, NC 27717-2446

**The Innocence Projects at the law schools of
Duke University, UNC-Chapel Hill, NC Central University & Campbell University**

CONSENT FOR RELEASE OF INFORMATION

I, _____, hereby authorize any and all
entities and persons, including my former attorney (s)

to release to The North Carolina Center on Actual Innocence, or to its staff or
student representatives, any and all records, files, reports, and information of any
kind related to me or to any criminal case involving me. By my signature below, I
represent that this waiver is voluntary and given without any reservation.

Signed on _____ (month, day, year)

Signature

NOTE: The North Carolina Center on Actual Innocence (including all its affiliated innocence projects and individuals) reviews cases for the sole purpose of investigating claims of actual innocence. The Center does not act as legal counsel to any person whose case is being investigated, until and unless the Center, through its legal counsel or her designees, specifically agrees in writing to take on such representation.