

Release of Liability Statement

I hereby release from liability all officials of the United States Air Force or their contractors for their acts performed in good faith and without malice in connection with evaluation for action concerning my application and my credentials and qualifications. I hereby release from liability any and all individuals and organizations who in good faith and without malice provide any and all information to officials of the United States Air Force, including medical facility officers or authorized medical staff representatives, concerning my professional practice, competence, ethics, character, and other qualifications for staff appointment and clinical privileges, and I hereby consent to the release of any and all such information.

Applicant Signature / Date