



# FORSYTH COUNTY SHERIFF'S OFFICE

NAME-BASED CRIMINAL HISTORY RECORD INFORMATION/INQUIRY FORM

## Name-Based Criminal History Record Information Consent/Inquiry Form

I hereby authorize \_\_\_\_\_ Forsyth County Parks & Rec \_\_\_\_\_ to conduct an inquiry for  
Agency/Company  
 the purpose listed below and receive any Georgia and/or national criminal history record information as authorized by state and federal law.

Full Name (print)			
Address			
Sex	Race	Date of Birth	Social Security Number

- This authorization is valid for   90   days from date of signature.
- I, \_\_\_\_\_, give consent to the above-named entity to perform periodic criminal history background checks for the duration of my employment.

\_\_\_\_\_  
 Signature Date

\_\_\_\_\_  
 Attorney for Individual (Pur E and U only) Bar Number Date

Date of Inquiry: \_\_\_\_\_ Time of Inquiry: \_\_\_\_\_ Operator's Initials: \_\_\_\_\_

Purpose Code Used: (check one)

NON-CRIMINAL JUSTICE PURPOSES	
	E – Employment
	M – Working with Mentally Disabled
	N – Working with Elderly
	W – Working with Children
	P – Public Records (no consent required)
	F – Probate Court/Weapons Carry License
PERSONAL REQUEST (INDIVIDUAL OR THEIR ATTORNEY)	
	U – Personal Copy
CRIMINAL JUSTICE EMPLOYMENT	
	J – Civilian Criminal Justice Employment (State & Ill Info Received)
	Z – Sworn Criminal Justice Employment (State & Ill Info Received)

The inquiry resulted in the following: (check all that apply)

	No Criminal Record Available
	Criminal Record (Attached/Released)
	No NCIC/GCIC Warrant
	Possible NCIC/GCIC Warrant (List Wanting Agency Below)

Wanting Agency Name: \_\_\_\_\_  
 Wanting Agency Telephone: \_\_\_\_\_

\_\_\_\_\_  
 Agency Designee Signature and Title