

Name-Based Criminal History Record Information Consent/Inquiry Form

I hereby give consent for the Johns Creek Police Department to receive any Georgia or  
Criminal Justice Agency  
III criminal history record information pertaining to me, as authorized under state and federal law for  
individuals seeking employment with a criminal justice agency.

<b>Full Name (print):</b>			
<b>Address</b>			
<b>Sex</b>	<b>Race</b>	<b>Date of Birth</b>	<b>Social Security Number</b>

This authorization is valid for 90 180 (circle one) days from date of signature.

I, \_\_\_\_\_ give consent to the above named to perform periodic  
criminal history background checks for the duration of my employment with this agency.

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

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Date of inquiry: \_\_\_\_\_ Time of inquiry: \_\_\_\_\_ Operator's initials: \_\_\_\_\_

Purpose Code used: (check one)

<input checked="" type="checkbox"/>	<b>Civilian Employment with a Criminal Justice Agency (J)</b> – Provides complete <i>Georgia</i> and <i>III</i> Criminal History Record Information except juvenile or restricted records and
<input type="checkbox"/>	<b>P.O.S.T. Certified Employment with a Criminal Justice Agency (Z)</b> - Provides <i>Georgia</i> and <i>III</i> Criminal History Record Information including restricted records that contain completed first offender sentences for any offense

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

<input type="checkbox"/>	No Georgia or III CHRI results available.
<input type="checkbox"/>	Georgia / III CHRI attached/released.

<input type="checkbox"/>	No NCIC/GCIC Warrant results available.
<input type="checkbox"/>	Possible NCIC/GCIC Warrant. Contact Agency listed below.

Wanting Agency Name:	
Agency Telephone:	

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Agency Designee Signature and Title

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Date