FANNIN COUNTY SHERIFF'S OFFICE GCIC CRIMINAL HISTORY FORM

NAME-BASED CRIMINAL HISTORY RECORD INFORMATION CONSENT/INQUIRY FORM

I HEREBY AUTHORIZE THE <u>FANNIN CO. RECREATION DEPT</u> TO CONDUCT AN INQUIRY FOR THE PURPOSE(S) LISTED BELOW AND RECEIVE ANY GEORGIA CRIMINAL HISTORY RECORD INFORMATION AS AUTHORIZED BY STATE AND FEDERAL LAW.

	1		
FULL NAME			
Address			
SEX	RACE	DATE OF BIRTH	SOCIAL SECURITY NUMBER
SIGNATURE			DATE
DATE OF INQUIRY:	Тіме о	F INQUIRY:OI	PERATOR'S INITIALS:
Purpose Code	USED: (CHECK A	LL THAT APPLY)	
E - EMPLOYMENT			
M - Working	WITH MENTALLY DIS	SABLED	
N - Working	WITH ELDERLY		
W-Working	WITH CHILDREN		
OTHER- PLEASE LIST CODE REASON:			
THE INOUIDY RESULT	TED IN THE FOLLOW	NG: (CHECK ALL THAT API	DI V)
	RECORD AVAILABLE		
CRIMINAL RE	CORD (ATTACHED/F	RELEASED)	
No NCIC/GO	CIC WARRANT		
Possible NC	IC/GCIC WARRAN	r (List Wanting Agency	BELOW)
AGENCY DESIGN	NEE SIGNATURE A	AND TITLE	DATE