Name-Based Criminal History Record Information Consent/Inquiry Form

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

Criminal Justice Agency

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

☒ **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.**

X _____ _____

Signature **Date**

Date of inquiry: _____ Time of inquiry: _____ Operator's initials: _____

Purpose Code used: (check one)

X	**Civilian Employment with a Criminal Justice Agency (J) –** Provides complete ***Georgia*** and ***III*** Criminal History Record Information except juvenile or restricted records and
	P.O.S.T. Certified Employment with a Criminal Justice Agency (Z) - Provides ***Georgia*** and ***III*** Criminal History Record Information including restricted records that contain completed first offender sentences for any offense

---

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

	No Georgia or III CHRI results available.
	Georgia / III CHRI attached/released.

	No NCIC/GCIC Warrant results available.
	Possible NCIC/GCIC Warrant. Contact Agency listed below.
Wanting Agency Name:	
Agency Telephone:	

_____ _____

Agency Designee Signature and Title **Date**