

GORDON COUNTY SHERIFF'S OFFICE

Mitch Ralston, Sheriff

CRIMINAL RECORD RELEASE-CONCENT AGREEMENT

I, \_\_\_\_\_ hereby authorize the Sheriff of Gordon County and/or his deputy, agent, or employee to conduct an enquiry into any criminal history records pertaining to myself which may be in any local, state, or federal files or database, including the Sheriff's office, Superior and/or other Courts, the Georgia Crime Information Center (GCIC) and/or National Crime Information Center (NCIC).

FULL NAME: \_\_\_\_\_

SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
Notary Public, State-of-Georgia-At-Large

My Commission Expires \_\_\_\_\_

PLEASE NOTE: ANY APPLICABLE CHARGES ACESSED BY THIS AGENCY FOR THIS SERVICE WILL BE THE ROPONSIBILTIY OF THE APPLICANT.

THIS ENQUIRY HAS HAS NOT RESULTED IN THE RECEIPT OF CRIMINAL HISTORY OF THE APPLICANT ABOVE.

\_\_\_\_\_  
Gordon County Sheriff's Office.