







# SHERIFF JOE CHAPMAN

## WALTON COUNTY SHERIFF'S OFFICE

1425 South Madison Avenue, Monroe, Georgia 30655  
Office (770) 267-6557  
Fax (770) 266-1500



### CRIMINAL HISTORY/ARREST RECORD REQUEST – CONSENT FORM

I hereby authorize Jane Beeco with WC P+R  
To receive any criminal history record information pertaining to me which may be in the files of any State or Local Criminal Justice Agency. This authorization is valid for 90 days from the date of signature.

\_\_\_\_\_  
(Last) (First) (Middle) Race Sex (Date of Birth)

\_\_\_\_\_  
(If applicable, maiden name or name used in past) Social Security Number

\_\_\_\_\_  
Address City/State/Zip Code Telephone #

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

Please circle one of the following for type of employment: \* Employment with mentally disabled  
\* Employment with elder care \* Employment with children \* Other \_\_\_\_\_

### DO NOT WRITE BELOW THIS LINE (OFFICIAL USE ONLY)

This statement is to certify the criminal arrest files of The State of Georgia have been searched and reveal the following information on the above listed subject:

- ( ) No Record with our agency ( ) No record on Ga. State File/GCIC
- ( ) Arrest Record as follows: ( ) See attached GCIC printout

\_\_\_\_\_  
WCSO # Employee Name Initials Date

\_\_\_\_\_  
Received By Date