



# Barrow County School System

Boldly Committed to Student Success

## Georgia Crime Information Center

### Consent Form

I hereby authorize Barrow County School System to receive any Georgia criminal history record information pertaining to me which may be in the files of any State or local criminal justice agency in Georgia. **Please attach a copy of your Driver's License.**

\_\_\_\_\_  
Full Name (Print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Sex

\_\_\_\_\_  
Race

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Special employment provisions (check if applicable):

- Employment with mentally disabled (Purpose code "M")
- Employment with elder care (Purpose code "N")
- Employment with children (Purpose code "W")
- Employment with firefighter agency, public/private agency, licensing, adoption/foster parents, individual record, public housing (Purpose code "E")

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**DO NOT WRITE BELOW THIS LINE**

Georgia Criminal Record: YES \_\_\_\_\_ NO \_\_\_\_\_

SID#: GA \_\_\_\_\_

Inquiry Made By: \_\_\_\_\_

Date: \_\_\_\_\_