

COBB COUNTY POLICE DEPARTMENT

545 South Fairground Street SE Marietta, Georgia 30060 770.499.3900 • fax: 770.499.4195 www.cobbpolice.com J.D. Ferrell Deputy Chief of Police B.D. Cohen Deputy Chief of Police S.C. Kucynda Deputy Chief of Police

E.S. VanHoozer Chief of Police

CRIMINAL HISTORY CONSENT FORM

I hereby authorize the Cobb County Police Department to obtain any criminal history information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia.

REQUIREMENTS: Photo identification for the Requester (and Person being inquired on if different). Person being inquired on signature must be notarized if not present at the time of the request. A \$20.00 fee is charged per request.

REQUESTER'S SIGNATURE:		DATE:			
To assure that the correct Purpose Co Child Care (W) □ Elderly Care (N) □				er (E) 🗆	
PERSON BEING QUERIED:					
Las	st	First		Middle	
SSN:	DOB: _				
ADDRESS:					
RACE: White Black White/Hispanic Black SEX: Male Female		Unknown □			
QUERIED PERSON'S SIGNATUR	RE:				
		Sworn to and	l signed before r	me this	
Notary				, 20	
Do you need the Police Record Tech	hnician's signature	notarized? Yes	□ No □		
DO NOT WRITE	BELOW THIS L	INE OFFICE I	PERSONNEL	ONLY	
UTILIZING GCIC/NCIC ACCESS A NO RECOR	A CHECK OF THE RD FOUND:				
Police Record Technician	Badge Ni	ımber	Date		
As per House Bill 314, Notary is not i	required; however,	all forms will be no	otarized upon re	equest.	
		Sworn to and signed before me this			
Notary		day of		, 20	



