

CLARKE COUNTY SCHOOL DISTRICT POLICE DEPARTMENT

ACP-F-140  
Form Number

RELEASE OF CRIMINAL HISTORY CONSENT FORM

S I, \_\_\_\_\_  
 U Last Name First Name Middle  
 B Social Security Number Height Weight Eye Color Hair Color  
 J Date of Birth Race Sex Telephone Number  
 E Street Address City State Zip Code  
 C  
 T

A AUTHORIZE: CLARKE COUNTY SCHOOL DISTRICT POLICE DEPARTMENT  
 U Name of Agency  
 T  
 H CCSD Human Resources or CCSD Police Department Personnel  
 O Name of Person to Pick Up Record  
 R  
 I Clarke County School District, 240 Mitchell Bridge Road  
 Z Street Address of Agency  
 E  
 D Athens Georgia 30606 (706) 546-7721 ext. 18482  
 City State Zip Code Telephone Number

A to receive my criminal history record from the Clarke County School District Police Dept. State of Georgia law enforcement  
 G officials, or any other enforcement officials, local, state or federal, who the Clarke County School District (CCSD) Human  
 E Resources Office may wish to contact. I understand that employment decisions may be based upon information the CCSD  
 N obtains. I give my continuing permission for the CCSD Human Resources Office to access such information throughout the  
 C course of my employment at any time the CCSD deems necessary. I understand that my continuing employment with the  
 Y CCSD can and will be determined by what information the CCSD receives or acquires. I do hereby affirm that any such  
 acquisition of information by the CCSD prior to or during my employment is not an invasion of my privacy, violates none of  
 my rights under the laws, federal or state, and I do hereby understand the reason and necessity for the CCSD to have access  
 to such information.

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

NOTICE: UNLESS ALL BLANKS ARE COMPLETED ON THIS FORM, NO INFORMATION WILL BE RELEASED.  
 THIS FORM WILL BE NOTARIZED BY PERSONNEL AT CLARKE COUNTY SCHOOL DISTRICT.

N  
 O SWORN TO AND SUBSCRIBED BEFORE ME:  
 T  
 A THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_  
 R  
 Y

\_\_\_\_\_  
 NOTARY PUBLIC



## Falsification or Misrepresentation on Job Application

The Clarke County School District wishes to inform all potential new employees that it is very important that all questions on the application be answered truthfully and to the best of their knowledge.

If you have been arrested or convicted of a felony or misdemeanor anytime in the past, your criminal background check will reveal this. If you have not responded truthfully to this question or any other question on the application, you may be immediately terminated or not employed with the Clarke County School District.

If there is a possibility that you have had an arrest or conviction in the past and failed to indicate such, you may do so now. Provide a written explanation including the charge, conviction, sentence received and the date.

Arrest(s) or conviction(s)  Yes  No

Explain below:

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Please sign below and return to Human Resources.

Signature

Date