



## CRIMINAL RECORDS CHECK

This application authorizes the Charleston County Sheriff's Office to release criminal arrest history information on the individual named below using the information provided. The result is indicative of what is on file based on the identifiers provided and not conclusive as a complete criminal arrest history.

The information obtained herein reflects criminal history on file with the Charleston County Sheriff's Office **ONLY**. It does not reflect criminal records with the North Charleston Police Department, Charleston City Police Department, or any other agency.

NAME (PRINT): \_\_\_\_\_

ADDRESS: \_\_\_\_\_ APT.: \_\_\_\_\_

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

DATE OF BIRTH: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_

SEX: \_\_\_\_\_ RACE: \_\_\_\_\_ ETHNICITY: \_\_\_\_\_ WEIGHT: \_\_\_\_\_ HEIGHT: \_\_\_\_\_

DRIVER'S LICENSE #: \_\_\_\_\_ STATE: \_\_\_\_\_

CONTACT PHONE#: \_\_\_\_\_ EMAIL: \_\_\_\_\_

I do hereby authorize the Charleston County Sheriff's Office to release any information in their files using the information provided above. I understand that the information released may prove unfavorable to me. I agree to hold any source of information blameless for any error in reporting this information. I hereby release all individuals from any liability arising out of, or resulting from, the release of this information.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PLACE OF EMPLOYMENT: \_\_\_\_\_