

SPIS INVESTIGATIONS

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CRIMINAL RECORD SEARCH REQUEST FORM

Date of Request:	Requestor:
Subject Full Name:	
Other Names Used:	Date of Birth:
Drivers License Number:	State of Issue:
Complete Address History Past 7 Years:	

CRIMINAL HISTORY: THIS INFORMATION WILL BE VERIFIED

Have you ever been convicted of a felony? Yes No

Have you ever entered a plea of guilty to a felony? Yes No

Have you ever entered a plea of "No Contest" to a felony? Yes No

Have you ever been placed on "deferred adjudication"? Yes No

If you answered "YES" to any of the above questions, give details:

Applicant signature : _____ Date: _____

FOR OFFICE USE ONLY:

This individual is clear of criminal records: _____

This individual is not clear of criminal records: _____

Comments: _____