

Administration William Howard Taft Law Center 230 E. Ninth Street, 10th Floor Cincinnati, Ohio 45202-2145 (513) 946-3580 Fax (513) 946-3581 www.probatect.org

PERSONAL INFORMATION AND FINGERPRINT RELEASE FORM

DESCRIPTION OF SUBJECT				
NAME		SEX M	F	
ADDRESS				
DATE OF BIRTH (Do <u>not</u> include your year	sof birth, only day and month.)			

	NSENT TO RELEASE OF PERSONAL INFORM NDUCT BACKGROUND CHECKS, AND TO FIN			
Court's staff investigate my background as any limitations otherwise suggested as to employment history; (2) my criminal and to record form, including without limitation financial and/or credit history (through w required to handle cash transactions or mathat may have been sealed or expunged by	ent or appointment with the Hamilton County Probates to my character, fitness and moral qualifications. I spot the foregoing consent, to conduct an investigation raffic (driving) background (as contained in public record, the CLEAR, LEADS, RCIC, NCIC and BMV date whatever credit sources the Probate Court may have aske financial decisions. The foregoing consent and recourt order and/or other information that would be counted at I have not been arrested for or charged with any record (if none, then so state)	pecifically authorize the Proposition (1) my education ords, non-public police real bases); (3) my military access to), particularly as elease includes the release onsidered to be confidential.	robate Court, without and background and cords, or in any other record; and, (4) may be to the latter if I are of any case record al and non-public.	
her prints forwarded to BCI&I for crim appointed by the Probate Judge. A job a or appointment by the Probate Judge, b Probate Judge requires it. If a successful refuses or otherwise fails to provide	or appointment by the Probate Judge, must conservinal history checks. This fingerprinting procedural applicant or appointee will not be fingerprinted unless to ut you must agree to fingerprinting in order to be applicant or appointee is offered a position or appfingerprints, then the job offer or appointment is theriff's office as arranged through the Probate Country of the probate Count	e is a condition precede ess he or she is actually of thired or appointed into pointment by the Probate may be withdrawn. Fin	nt to being hired of offered employments of any position if the Judge but declines	
BY SIGNING BEL	OW, I ACKNOWLEDGE THAT I HAVE READ AGREED TO ITS TERMS COMPLETELY.	THIS CONSENT AND		
SIGNATURE	DAT	E		

Hamilton County Sheriff Office

Personal Information Release Form Print Clearly

Name:			
Address:			
Date of Birth:			
Soc. Sec. No.:			
Sex: M	F	Race:	
convictions that I have on file. below within (1) one year from to	If it is necessary This Authore date signed. I her	Sheriff Office to release information re to verify this Authorization, I can be horization is void if not exercised by the preby agree to indemnify the County of Ha	e contacted at telephone number person or organization named amilton and the Hamilton County
Sheriff and his representatives for	any liability arising	out of the improper use of the information	n provided.
Signature:		Date:	
	information applied	fication of Purpose I for will be used only for the purpose for the use or if retained, not released outside	
Type of Record Check:			
Criminal: Traffic: Criminal and Traffic: Yes			
Information Requested By: Hami Date: Contact Person: Scott Weikel Address: 230 E. 9 th Street, 10 th F Phone No: 513-946-3545	·	te Court	
	FOR SH	ERIFF OFFICE USE ONLY:	
Operator	Date:		
Record:	No Record:		