



Consent Form for Fingerprinting and Criminal History Records Search

Instructions to Applicant:

- Please completely fill out all sections of this form.
- Submit a cashier's check or money order for \$52.90 payable to Dougherty County School System, or
- Complete a Payroll Deduction Authorization form (PAY-F010)

Type or print all information. Inaccurate, incomplete or illegible information will delay processing.

SECTION 1

Social Security Number		Name (Last, First, Middle Initial):		
Mailing Address:				
City:	State:	Zip:	School/ Department	
Date of Birth:	Height:	Weight:	Sex:	Race:

SECTION 2

Please choose (✓) one of the following

- Money Order or Cashier's Check – in the full amount of \$52.90 (Payable: DCSS)
- Payroll deduction for the full amount of \$52.90
- Payroll deduction for two pay periods of \$26.45

SECTION 3

I understand that I must be fingerprinted in order to continue my employment with the Dougherty County School System. O.C.G.A. 20-2-211 states that all personnel employed by a local unit of administration shall be fingerprinted. The local unit of administration shall have the authority to employ such person for a maximum of 20 days in order to allow for the receipt of the results of the criminal record check.

I understand I am responsible for fees associated with fingerprinting in the amount of \$52.90.

I hereby authorize and consent for the Dougherty County School System Police Department to use my fingerprints to secure my criminal history from GCIC and NCIS.

Applicant Signature: _____ Date: _____

SECTION 4

DCSS Police Use Only: No Record Arrest record on file. <i>(If record, see attached)</i> Record of any convictions. <i>(If record, see attached)</i>	Signature _____ <i>DCSS Police Officer</i> Date _____
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HRS Use Only:	Comments: