



# OFFICE OF SPENCER COUNTY SHERIFF

120 North Second Street  
Rockport, Indiana 47635  
Phone: 812-649-2286  
FAX: 812-649-2209

## EMPLOYMENT CRIMINAL HISTORY RELEASE

I, \_\_\_\_\_, give the Spencer County Sheriff's Office permission to run my criminal history and my former employer; \_\_\_\_\_, Permission to release any and all information regarding my past employment with their agency or business.

This employer will not be held liable in any manner for its release and use by the Spencer County Sheriff's Office.

### Authorizing Application (Print)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**ALL INFORMATION ON THIS PAGE IS REQUIRED FOR THE APPLICATION TO BE PROCESSED.**