

# AUTHORIZATION FOR CRIMINAL RECORDS CHECK

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**TO: Linn County Juvenile Department**

Please complete this information sheet and submit it with your application for work with the Linn County Juvenile Department. The existence of a criminal record/protective service history will not necessarily disqualify you for work. Any criminal record/protective service history will be individually considered on the basis of how it relates to the work, which you would perform as an employee.

NAME: \_\_\_\_\_  
(Last) (First) (Middle)

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Gender: Female \_\_\_\_\_ Male \_\_\_\_\_

Race: American Indian or Alaskan Native \_\_\_\_\_ Asian or Pacific Islander \_\_\_\_\_  
Black \_\_\_\_\_ White \_\_\_\_\_ Unknown \_\_\_\_\_

## **SECTION 1:**

Have you ever been convicted of a crime? No \_\_\_\_\_ Yes \_\_\_\_\_

Are you currently charged with a crime? No \_\_\_\_\_ Yes \_\_\_\_\_

Have you ever had a case investigated by DHS Child Welfare/Protective Services for any type of abuse of a child or children? No \_\_\_\_\_ Yes \_\_\_\_\_

If the answer to any of the above questions is yes, please complete the remainder of this form.

If the answer to all of the above questions is no, please skip SECTION 2 and complete SECTION 3 of this form.

## **SECTION 2:** (A) Criminal Section

Crime convicted of or charged with: \_\_\_\_\_

Location in which you were convicted or are now charged: \_\_\_\_\_

Date of conviction or charge made: \_\_\_\_\_

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Court in which conviction was entered or case is now pending: \_\_\_\_\_  
\_\_\_\_\_

Rehabilitative program undergone \_\_\_\_\_

(B) Child Welfare/Protective Service

Allegation of abuse investigated: \_\_\_\_\_

County in which it occurred: \_\_\_\_\_ Date of Occurrence: \_\_\_\_\_

Result of the investigation: Founded \_\_\_\_\_ Unfounded \_\_\_\_\_

**SECTION 3:**  
**APPLICANT'S CERTIFICATION**

I hereby certify that all statements made in this application or appended to it are true and correct to the best of my knowledge. I am aware that withholding pertinent information or including information found to be grossly inaccurate will be cause for further consideration of my application. I understand this is not to be considered as an indication of probable appointment nor an obligation upon the department to make an appointment, but a part of the selection process only.

**AUTHORIZATION TO RELEASE CREDIT AND CHARACTER INFORMATION**

Having made application with the Linn County Juvenile Department, I hereby authorize a complete investigation of my record by the Linn County Sheriff, or another police agency authorized to conduct their applicant investigation, to ascertain any and all information which may concern my credit and character, whether same is of record or not and release your organization and all persons whomsoever from any charge because of furnishing said information. I hereby acknowledge that I am aware the results of this investigation are confidential for Linn County Juvenile Department use only and will not be disclosed to myself or any other person.

Signed \_\_\_\_\_

Date \_\_\_\_\_