

Harford County Sheriff's Office
Request for Criminal Background Check
for Security Clearance

Approved: _____ Disapproved: _____
Date: _____ Staff Initials: _____

Contractual: ☐ Yes ☐ No

Volunteer: ☐ Yes ☐ No

Company: _____

Program Provided: _____

The information requested is used solely for background investigation purposes and is held in strict confidence.

Personal Information - Incomplete applications will not be processed.

Name: _____		_____	
Last	First	Middle	Maiden Name/Alias
Address: _____		City, State, Zip: _____	
Home Phone: _____		Cell Phone: _____	Email Address: _____
Social Security: _____		Driver's License No: _____	State: _____
Date of Birth: _____	Race: _____	Sex: _____	Height: _____ Weight: _____ Hair: _____ Eyes: _____
City of Birth: _____		State of Birth: _____	Country of Birth: _____
Employer and Occupation: _____			
Group Affiliation: _____			
Group Leader/Contact Person: _____		Phone: _____	
Activity to be performed: _____			

Have you ever:

- A. Been placed under arrest for any reason? ☐ Yes ☐ No
B. Been convicted of a crime? ☐ Yes ☐ No
C. Had police come to your residence to investigate a crime or criminal activity, except for a complaint by you of domestic violence? ☐ Yes ☐ No
D. Been served with a protection order for abuse? ☐ Yes ☐ No
E. Been investigated regarding any form of sexual abuse, harassment, or retaliation? ☐ Yes ☐ No

If you answered yes to any questions above, please complete the following:

Letter: _____ Date: _____ Where: _____

Description: _____

Have you ever been employed, in any capacity, at the Harford County Sheriff's Office? ☐ Yes ☐ No

If yes, explain: Dates: _____ Capacity: _____
Reason for separation: _____

Do you know anyone who is currently incarcerated in the Harford County Detention Center? ☐ Yes ☐ No

If yes, explain. _____

Do you currently associate with or have any relationship with anyone whom you know has participated in criminal activity? ☐ Yes ☐ No

If yes, explain. _____

FOR AGENCY USE ONLY:

Meters/NCIC: _____	HCSO RMS: _____	SID: _____
J-Portal: _____	JIS: _____	FBI: _____

I authorize the Harford County Sheriff's Office to conduct an initial criminal history background check and be updated annually.

This authorization is limited in scope and is required as part of the screening process.

Dissemination of information obtained during a criminal history background check is restricted to applicable laws.

I certify that all information provided on this application request form is accurate and complete.

Applicant Signature: _____

Date: _____