

DAWSON COUNTY, GEORGIA
EMPLOYEE APPLICATION FOR WORK PERMIT

*** Please refer to the appropriate ordinance for age restrictions on employment ***

BACKGROUND CHECK CONSENT FORM

An investigative fee as applicable (cash, money order or check payable to Dawson County) must accompany this form. Each employee must be available for photographing and such other investigation as may be required. Applicants must bring a valid government issued photo I.D. Phone 706.344.3232 for questions. Permits are processed daily from 8:30 am until 4:00 pm at the Dawson County Marshal's Office at 25 Justice Way Suite 2322, Dawsonville, GA 30534.

Fee Received: <input type="checkbox"/> M.O. <input type="checkbox"/> Cash <input type="checkbox"/> Check. <input type="checkbox"/> Credit Card	_____ Amount	_____ Date	_____ By:
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I hereby request the Dawson County Marshal's Office to receive any Criminal History Record information that may pertain to myself and may be found in any Federal, State, or Local criminal justice agency in Georgia.

Records obtained from the Dawson County Marshal's Office may only be used by the requesting agency or entity solely for the purposes requested. If any information is used to deny employment or license, that action shall not reflect on the liability of this office but on the agency or entity who makes that decision and to allow the person/applicant a chance to dispute any information which may be in error. Any dissemination of this information must be with the permission of the person/applicant. Dawson County shall not be held responsible for information obtained by another agency, State or Federal, which provides such information and whose files reflect records which may contain errors or omissions. TO REDUCE ERRORS, FULL AND COMPLETE INFORMATION IS REQUIRED. This request is in accordance with State law as it applies to:

Agency Requesting History: Dawson County Marshal's Office 706/344-3232

(PRINT) Last Name: _____ First Name: _____ Middle Name: _____

Address: _____
 No. Street City State Zip Code

Home Phone No. w/Area Code: _____ SS# _____

Sex: _____ Race: _____ Date of Birth: _____ Height: _____ Weight: _____

Hair: _____ Eye: _____ City & State of Birth: _____

Employer: _____ Phone No. w/Area Code: _____

Address of Employer: _____

Notary: _____

Signature of Applicant

For Official Use Only
 Background Check Results:

