



County Criminal Record Check

Fill out the top of this form and take it to your county sheriff's department or county criminal clerk's office, one for each adult 18 and older.

I hereby authorize Adoption Promises, a licensed child placement agency, to receive any criminal history record from this county pertaining to me, which can be accessed lawfully in the files of any state or local criminal justice agency in Tennessee.

Applicant's Name: _____

Address: _____

Social Security Number: _____ DOB: _____ Age: _____ Sex: _____

Applicant's Signature: _____ Date: _____

(OFFICIAL USE ONLY)

This statement is to certify that the criminal arrest files in this county in the State of Tennessee have been searched by name and social security number and reveal the following information on the above listed person.

☐ No Arrest Record

☐ See attached printout

☐ Arrest Record as follows

Name of County/Dept: _____ Signature of Authorized Person: _____

Date: _____