



**DAWSON COUNTY SHERIFF'S OFFICE**  
**SHERIFF BILLY CARLISLE**  
19 Tucker Avenue  
Dawsonville, Georgia 30534  
Office (706) 344-3535 ~ Fax (706) 344-3537



**MAJOR BRANDON BRANSON**  
*Sheriff's Services Division*

**MAJOR RAY GOODIE**  
*Criminal Investigations Division*

**MAJOR JEFF JOHNSON**  
*Detention/Inmate Services Division*

**MAJOR GREG ROWAN**  
*Uniform Patrol Division/E-911 Comm. Division*

**CRIMINAL HISTORY REQUEST**

I hereby request for the Dawson County Sheriff's Office to retrieve any criminal history record information, which may pertain to myself (or the person named below), that may be found in any state or local criminal justice agency in Georgia.

Records obtained from the Dawson County Sheriff's Office shall only be used by the requesting agency or individual solely for the purposes requested. If any information is used to deny employment or license, it 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 the information provided must be with 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 ENSURE ACCURACY, PLEASE PRINT AND PROVIDE COMPLETE INFORMATION.

Date of request: \_\_\_\_\_

Agency requesting criminal history (name and phone #): \_\_\_\_\_

Full name: \_\_\_\_\_ Phone #: \_\_\_\_\_

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

SSN: \_\_\_\_\_ DOB: \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_ Eyes: \_\_\_\_\_ State of birth: \_\_\_\_\_

Special employment provisions (check if applicable):

- ☐ Employment with mentally disabled (Purpose code "M")
- ☐ Employment with elder care (Purpose code "N")
- ☐ Employment with children (Purpose code "W")

*To be completed by Dawson County Sheriff's Office personnel:*

Select purpose code used: ☐ C ☐ E ☐ F ☐ J ☐ M ☐ N ☐ W ☐ Z

Case number or criminal history number used: \_\_\_\_\_

\_\_\_\_\_  
**SIGNATURE OF APPLICANT**

\_\_\_\_\_  
**SIGNATURE OF REQUESTING PERSON**

\_\_\_\_\_  
**NOTARY SIGNATURE**