

REQUEST FOR LIMITED CRIMINAL HISTORY INFORMATION – HENDRICKS COUNTY SHERIFF'S DEPT.

REQUESTING AGENCY OR INDIVIDUAL: _____

SUBJECT OF REQUEST (Please Print):

Last Name: _____ First Name: _____ MI: _____

Other Names Used/Maiden Name: _____

Date of Birth: _____ Last Four Digits of Social Security Number: _____

REASON FOR REQUEST:

- Applicant has applied for employment with a non-criminal justice organization or individual;
- Adoption proceeding;
- Applicant has applied for a license and criminal data is required by law to be provided in connection with the license; Set Out Authority: _____
- Applicant is a candidate for public office or a public official;
- Is in the process of being apprehended by a law enforcement agency;
- Is placed under arrest for the alleged commission of a crime;
- Has changed that his rights have been abused repeatedly by criminal justice agencies;
- Is the subject of judicial decision or determination with respect to the setting of bond, plea bargaining, or sentencing;
- Has volunteered services that involved contact with, care of, or social supervision over a child who is being placed, matched, or monitored by a social services agency or a non-profit organization.
- Is being investigated for welfare fraud by an investigator of the Division of Family and Children;
- Is being sought by the parent locator service of the Child Support bureau of the Division of Family and Children;
- Has been convicted of any of the following:
 - a. Rape (I.C. 35-42-4-1), if the victim is less than eighteen (18) years of age.
 - b. Criminal Deviate Conduct (I.C. 35-42-4-2), if the victim is less than eighteen (18) years of age.
 - c. Child Molesting (I.C. 35-42-4-3)
 - d. Child Exploitation (I.C. 35-42-4-4)(b)
 - e. Possession of Child Pornography (I.C. 35-42-4-4)(c)
 - f. Vicarious Sexual Gratification (I.C. 35-42-4-5)
 - g. Child Solicitation (I.C. 35-42-4-6)
 - h. Child Seduction (I.C. 35-42-4-7)
 - i. Incest (I.C. 35-46-1-3), if the victim is less than eighteen (18) years of age.

Other (Please Specify): _____

SIGNATURE: _____ Date: _____

Any person who uses a "Limited Criminal History" for ANY purpose not specified herein commits a Class A Misdemeanor. This limited adult criminal history reflects results found in Hendricks County ONLY within the last 10 years. Any records needed prior to that time must be obtained from the Indiana State Police Central Records Division, Indianapolis, Indiana.

Subscribed and sworn to before me, a Notary in the County of _____

_____, State of _____

This _____ day of _____

Notary Public: _____

My Commission Expires: _____

{Seal}

NO CRIMINAL HISTORY RECORD WAS FOUND BY THE "HENDRICKS COUNTY SHERIFF'S DEPARTMENT".

THE ABOVE INDIVIDUAL HAS THE FOLLOWING RECORD: _____

(Records inspected by) Hendricks County Sheriff's Office

Title

Date