

**CITY OF VARNELL
P O BOX C
VARNELL, GA 30756
PHONE: 706-694-8800**

AUTHORIZATION TO OBTAIN CRIMINAL BACKGROUND AND DRIVING REPORT

I, the undersigned, being an applicant for employment with the City of Varnell as an employee/officer in the Varnell Police department do hereby expressly authorize the City of Varnell, the Varnell Police Department or the Whitfield county Sheriff's Department at the request of the city of Varnell, to conduct an investigation of my background and driving history for any length of time that they deem necessary. Also, by my signing below, I am authorizing the City of Varnell, Georgia, its officers, departments, agencies or divisions with whom I have made an application for employment to obtain my criminal background report and driving record for the purposes of employment with the city, and if I am employed by the city, they may conduct an investigation into my background and driving record at any time they deem necessary.

Full Name Printed: _____

Street Address: _____

City: _____ **State:** _____ **Zip:** _____

Sex: _____ **Race:** _____ **Date of Birth:** _____

Drivers License No. _____ **Social Security No:** _____

Date: _____ **Signature of Applicant:** _____

Note: Should the City of Varnell take any adverse action toward denying employment based in whole or in part on your criminal background report, the city will provide you with a copy of the report.

Office use only below line

Date : _____

This is to certify that _____ **does not have a criminal record on file as of the above date. If other than none, list violations on back.**

Officer, Varnell Police Dept. or Whitfield Co. Sheriff's Dept.