



TUPELO POLICE DEPARTMENT
CHIEF OF POLICE
Tony Carleton

AUTHORIZATION FOR BACKGROUND CHECK
MUST HAVE A STATE ISSUED ID

I hereby authorize the Tupelo Police Department to conduct a background screening check with law enforcement or any other agencies to determine suitability for employment or any other purposes.

PLEASE PRINT

I, _____ request a records check on myself.

LAST NAME _____ FIRST NAME _____

MIDDLE NAME _____ RACE _____ SEX _____

DOB ____/____/____ SSN ____/____/____

DRIVER LICENSE # _____ STATE _____

Signature _____ Date ____/____/____

Tupelo Police Department has performed the background check with the following results.

() NO RECORDS FOUND () CITY COURT/ CRIMINAL FILE _____

NOTE: THIS RECORD CHECK COVERS THE CITY OF TUPELO ONLY

This included all records that have been finalized by the Tupelo Municipal Court and returned to the Police Department for processing.

Tupelo Police Dept. Employee Signature _____ DATE ____/____/____