

RESCUE FIRE COMPANY INCORPORATED
307 GAY STREET • P.O. BOX 776
CAMBRIDGE, MARYLAND 21613
(410) 228-1670

**Request for
Criminal Record Check**

Public Safety Article, Title 6, Subtitle 3, §6-306 of the Maryland Code states:
"Subject to Title 10, Subtitle 2 of the Criminal Procedure Article, a fire department or rescue squad of the State or a political subdivision of the State, a volunteer fire company or rescue squad, or an ambulance service licensed under § 13-515 of the Education Article may request the State Fire Marshal or other authorized agency that has access to the Criminal Justice Information System Central Repository in the Department of Public Safety and Correctional Services to conduct an initial criminal history records check on an applicant for employment or appointment as a volunteer or career firefighter, rescue squad member, or paramedic."

Therefore, we the officers and members of **Rescue Fire Company, Inc.** request a criminal record check on the member applicant whose name appears below.

_____ Date _____ President or Vice President

Applicant's Full Name _____
Last First Middle

Applicant's Full Address _____
Street/Ave. City State Zip

Date of Birth _____ Sex _____ Race _____ Social Security Number _____

Drivers License Number _____ State _____

*Have you ever been convicted of any Crime? Yes _____ No _____

If yes, explain _____

*I _____ authorize Rescue Fire Co., Inc. to conduct a criminal record search.
Type/Print Full Name

I understand that if this check returns a result of "**appears to have a known criminal record**" I must complete a State of Maryland Criminal Record Check Form SFM 007 and two classifiable fingerprint cards along with a check in the amount of \$42.00 made payable to "CJIS Central Repository" and agree to provide a complete copy of the results of the State of Maryland background check to the membership investigation committee; should I wish to have the application process continue. I further understand that the complete State of Maryland background check may take six weeks or more to complete.

_____ Signature of Applicant _____ Date

A Criminal Justice Information System (CJIS) check has been conducted and indicates that the applicant

Appears to have NO / appears to have a known criminal record.

_____ Agency Conducting Check _____ Signature of Person Conducting Check _____ ID# _____ Date Check Conducted