

OFFICE OF THE SHERIFF  
TIFT COUNTY, GEORGIA

Sheriff  
Gene Scarbrough



P.O Box 46  
Tifton, Georgia 31793  
(229) 388-6020  
FAX (229) 388-6200

**CONSENT FORM**

I hereby authorize Tift County Sheriff's Office to receive any criminal history records pertaining which may be in the files of any state or local criminal justice agency.

I hereby give consent for the Tift County Sheriff's Office to perform periodic Criminal History background checks for the duration of my employment with: \_\_\_\_\_

Name of Employer

Please Print:

Full Name: \_\_\_\_\_  
Last First Middle

Social Security #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_

Purpose of Criminal History: FIRST BAPTIST CHURCH - MISSION TRIP

Signature \_\_\_\_\_ Date \_\_\_\_\_

**NOTE:** Please attach a photo copy of both identifications  
(Valid State Driver's License and other form of ID)

Valid State Drivers License:

Second Form of Identification:

DL Number: \_\_\_\_\_

Number: \_\_\_\_\_

Date Issued: \_\_\_\_\_

Issued by: \_\_\_\_\_

**Purpose Code:** \_\_\_\_\_

Support Services Personnel

CRIMINAL HISTORY Completed by: \_\_\_\_\_  
SECOND PERSON CHECK Completed by: \_\_\_\_\_