



Office of the State Attorney

Twentieth Judicial Circuit, State of Florida

Charlotte - Collier - Glades - Hendry - Lee

Release Authorization Form

The State Attorney's Office, a Criminal Justice Agency will conduct thorough background investigations on all applicants as part of the pre-employment hiring process and at any time during your employment. At a minimum, the following checks will be completed on all post job offers.

National Crime Investigation – An FCIC/NCIC search will be completed on all applicants and all members of his or her household that are 18 years of age or older.

Fingerprinting – All fingerprints are submitted electronically to the State Wide Fingerprinting Identification System. If an applicant's fingerprints reveal a prior criminal background, a review of the applicant's employment status will be completed by the State Attorney and or his Representatives.

Drug Testing – Is completed as part of the hiring process and will be used on a continuous/ recurring process if deemed necessary by the State Attorney and or his Representatives

Education Verification – We verify all post-secondary degrees and/or high school diplomas for all Support Staff and Investigators. Copies of diplomas and or transcripts are required as part of the hiring process.

Prior Employment Verification - Is completed as part of the hiring process and will be used on a continuous/recurring process if deemed necessary by the State Attorney and or his Representatives

Social Security Number Use – In accordance with the FSS 119.071, the State Attorney's Office may collect Social Security numbers for the following purposes:

- **Application Process** – for the purpose of collecting information related to background investigations, to include fingerprints, NCIC/FCIC checks, verification of employment, citizenship, local and state records checks, clarification for duplicate names, verification of Military Service.
- **Payroll** – for reporting wages to Internal Revenue Service, Division of Retirement and New Hire Reporting.
- **Insurance**- for medical, dental, life insurance policies, and supplemental insurance plans.
- **Medical Leave** – for Worker's Compensation reporting and medical purposes associated with Worker's Compensation.

I, _____, hereby give permission to the State Attorney's Office, Twentieth Judicial Circuit, to do a complete background investigation and criminal history checks on myself and any other adults living in my household. The background checks will include NCIC, FCIC, DAVID, Odyssey, CJIS, and JIS (including APPRISS, CCIS and DOC). I understand that even though this background check is being done, I have not received a conditional job offer, or a firm job offer.

Signature: _____ Date: _____



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Background Supplement – Print Clearly					
Personal History - Section #1					
Print full name as shown on your Social Security Card					
Last:		First		Middle	
Have you ever used or gone by any other name or alias? Yes _____ No _____					
Maiden Name:			From Date:		To Date:
Other Name Used:			From Date:		To Date:
Date of Birth:		Place/City:			
County	State	Country			
Race:		Sex: Female _____ Male _____			
Social Security Number:					
Current Drivers License #				State Issued:	
Have you ever been issued a Drivers License in another state? Yes _____ No _____			If yes, where:		
Current Address (include apartment #, city, state, & zip code):				From Date:	
Any other address used in last 12 months					
Month/Yr	Month/Yr	Street Address	City	County	State
OTHER ADULTS IN HOUSEHOLD (18 YEARS OR OLDER)					
Full Name:			Date of Birth:		
SSN:			Race: _____ Female _____ Male _____		
Full Name:			Date of Birth:		
SSN:			Race: _____ Female _____ Male _____		
Full Name:			Date of Birth:		
SSN:			Race: _____ Female _____ Male _____		



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1. Have you ever been dismissed or asked to resign from any employment or position you have held, or have you quit any job after being told you would be fired? _____ **Yes** _____ **No** **If, yes, please provide details. Employer's Name:** _____

Date: _____ **Reason:** _____

2. Have you left a job by mutual agreement following allegations of misconduct or unsatisfactory job performance? **If yes, please provide details.** _____ **Yes** _____ **No**

Employer's Name: _____ **Date:** _____

Reason: _____

3. Have you left a job for other reasons under unfavorable circumstances? **If yes, please provide details.**

_____ **Yes** _____ **No** **Employer's Name:** _____

Date: _____ **Reason:** _____

4. Have you ever had any disciplinary action taken against you by an employer or in any position you have held? _____ **Yes** _____ **No** **If yes, please provide details.**

Employer's Name: _____ **Date:** _____

Action and Reason: _____

5. Do you own a business or are you a partner/corporate officer in any business or organization not listed above as a current or former employer? _____ **Yes** _____ **No**

If yes, please provide details, business name and address: _____



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Arrest History/Court Record – Section #2

1. Have you ever been arrested, received a notice or summons to appear, charged, convicted, pled nolo contendere or pled guilty to any criminal violation, regardless if the record was sealed or expunged?
 Yes **No Explain:** _____
2. Have you ever been cited for a criminal traffic violation?
 Yes **No Explain:** _____
3. If yes to question #1 or #2 list all such matters even if you were not formally charged or required to appear in court, were found not guilty, or the matter was settled by payment of fine or forfeiture of collateral, or pre-trial diversion. (Include your juvenile record and records of arrests which have been sealed, if any.)

Date	Charge	Court & Place	Disposition

Provide details of all criminal arrests listed above; use back of page if you need additional space.

4. Have you been detained by any law enforcement officer for investigative purposes or to your knowledge have you ever been the subject of or a suspect in any criminal investigation?
 Yes **No Explain:** _____
5. Have you ever been a plaintiff or defendant in a court action (include any liens, lawsuits, bankruptcy, domestic violence injunction, etc)? **Yes** **No**

Explain: _____

Print Name

Applicant Signature

Date