



OFFICE OF THE FIRE MARSHAL
Worcester County

GOVERNMENT CENTER
ONE WEST MARKET STREET, ROOM 1003
SNOW HILL, MARYLAND 21863-1194
TEL: 410-632-5666
FAX: 410-632-5664
www.wcfmo.org

Jeffrey A. McMahon
Fire Marshal

Matthew W. Owens
Chief Deputy Fire Marshal

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, fire departments and rescue squads or any of its political subdivisions and volunteer fire companies and rescue squads may request a criminal record check on an applicant for employment or appointment as a volunteer or paid firefighter, rescue squad member or paramedic."

Therefore, we the officers and members of the _____

(Full Name & Address of Requesting Company)

Request a criminal record check on the member applicant whose name appears below.

<i>Date</i>	<i>President or Chief</i>		
Applicant's Full Name:	_____		
	<i>Last</i>	<i>First</i>	<i>Middle</i>
Applicant's Full Address:	_____		
	<i>Street</i>	<i>City</i>	<i>State</i> <i>Zip</i>
Date of Birth ____/____/____	Sex ____	Race ____	Social Security #: _____
			____/____/____
Driver's License #: _____			State: _____
Have you ever been convicted of any Crime?	Yes _____	No _____	
If yes, explain:	_____		

I, _____ authorize the Worcester County Fire Marshal's Office to conduct a criminal record search.

Signature of Applicant
(See Instructions On Reverse Side)

<u>WORCESTER COUNTY FIRE MARSHAL'S USE ONLY</u>	
_____	A Criminal Justice Information System (CJIS) record check indicates the applicant <u>DOES NOT</u> HAVE A KNOWN CRIMINAL RECORD.
_____	A Criminal Justice Information System (CJIS) record check indicates the applicant <u>DOES</u> HAVE A KNOWN CRIMINAL RECORD.
_____ <i>Signature of the Fire Marshal</i>	_____ <i>Date</i>
<i>Citizens and Government Working Together</i>	