



Town of Portland, CT ❖ [www.portlandct.org](http://www.portlandct.org)  
**Criminal History Background Check**

*It is the Town's policy to provide a safe environment and therefore shall perform a criminal history background check on each candidate recommended for service with the Town when appropriate in relation to the position. Service is contingent upon a successful criminal background check. The information collected will be treated confidentially. By completing this form you are consenting to the criminal history background check.*

PRINT CLEARLY or TYPE

**PERSONAL INFORMATION**

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

LAST

FIRST

MIDDLE

Present Address: \_\_\_\_\_

STREET

CITY

STATE

ZIP

Permanent Address: \_\_\_\_\_

STREET

CITY

STATE

ZIP

Place of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Sex: \_\_\_\_\_ Race: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Driver's License No.: \_\_\_\_\_ Endorsements: \_\_\_\_\_

Expiration of Driver's License: \_\_\_\_\_

- 1. Have you ever been convicted of a crime?  Yes  No
- 2. Are you currently facing criminal charges?  Yes  No

The undersigned hereby attests that all information supplied within this application is true and accurate. By signing this form I give the Town of Portland permission to conduct a record check based on the above information. By signing this form, I also give the Town of Portland permission to take my photograph.

APPLICANT SIGNATURE\*: \_\_\_\_\_

\*If applicant is under the age of 18 years, a parent or guardian must co-sign below

Parent or Guardian SIGNATURE: \_\_\_\_\_

Reviewed by P.P.  
Badge #

Approved

Denied

Service Assignment of Applicant: \_\_\_\_\_