ONE CHURCH, ONE CHILD OF FLORIDA, INC.

LOCAL LAW ENFORCEMENT RECORD CHECK FORM

The person(s) described below holds or is applying for a sensitive position working with children or developmentally disabled adults. Pursuant to Chapter 85-54, Laws of Florida, this person(s) is subject to a local law enforcement record check.

(1) Name:_____
Last First Middle

Race:_____ Sex:_____ Date of Birth:_____

Social Security Number:_____

(2) Name:_____
Last First Middle

Race:_____ Sex:_____ Date of Birth:_____

Social Security Number:_____

Please conduct a local criminal record check on this person(s) and indicate your finding below:

Record Found: ☐ No
☐ Yes Nature:_____

Date:_____

Date Check Completed:_____ Signature:_____

Please return this form by:_____

TO: One Church, One Child of Florida, Inc.
Claude Pepper Building, Room 806
111 W. Madison Street
Tallahassee, Florida 32399
(850) 414-5620

Requestor's Signature:_____