Town of South Kingstown Criminal Record Check

Per **Rhode Island General Laws**, only South Kingstown residents and/or those volunteering and/or seeking employment in South Kingstown may have a Criminal Record check performed at the South Kingstown Police Department. Please select the category / reason you need a Criminal Record check and/or finger printing performed. If you do not see a category that applies to you, please check with the South Kingstown Police Department Dispatcher.

Below are categories that require a $36.00 fee. Check or Money Order payable to: "Town of South Kingstown".

(__) Adoptive Parent **(__) America Reads / SK CARES** **(__) Bus Drivers / Monitors**

(__) Firefighter **(__) Massage Therapist** **(__) Public/Private School**

(__) Medical Marijuana Caregiver **(__) Mental Health Worker** *(South Shore Mental Health, DCYF, Butler Hospital, Etc.)*

Below are categories that do not require any fee.

(__) Child Care Employees **(__) Foster Parent** **(__) Volunteer / Mentor / Intern (NO PRINTS)**

Two (2) Forms of identification must accompany this application. At least one (1) I.D. must have a photograph.
(Examples of I.D.'s: Driver's License, Passport, Birth Certificate, Social Security Card, etc. (NO CREDIT / CHARGE CARDS)

All requested information must be completed to avoid a delay in processing.

Name:_____
Last First Middle

Aliases and/or Maiden Names previously used:_____

Address: _____
Street City State / Zip

Social Security Number: _____ Driver's License # and State:_____

Date of Birth: _____ Place of Birth (State / Country):_____

Telephone (Home and/or Cell): _____ U. S. Citizen: Yes (__) No (__)

Sex: Male (__) Female (__) Height:_____Weight:_____ Eye Color:_____ Hair Color: _____

Race: White (__) Black (__) Hispanic (__) Asian (__) American Indian (__) Other (__) _____

Employer/Requesting Agency:_____ Telephone: _____

Address: _____
Street City State / Zip

I hereby give permission to the South Kingstown Police Department and its representatives to conduct a criminal record check for the purpose of employment, volunteering and/or licensing and will not hold any member of the South Kingstown Police Department or Town of South Kingstown liable for the results and/or content of the criminal record check.

Applicant's Signature _____ Date _____

Officer Signature and Badge Number_____