

**BALTIMORE COUNTY DEPARTMENT OF CORRECTIONS
SECURITY CLEARANCE APPLICATION**

DEPARTMENT USE ONLY

PROX RENEWAL _____
CLEARANCE RENEWAL _____
LEVEL _____

ALL OF THE BELOW INFORMATION MUST BE PROVIDED

Last Name: _____		First Name: _____		Full Middle Name: _____	
Maiden Name: _____	Date of Birth: _____ (Month) (Day) (Year)	Place of Birth: _____	Sex: _____ Male _____ Female _____	Race: _____ White/Caucasian _____ Black/African American _____ Asian _____	
Height: _____	Weight: _____	Eyes: _____	Hair: _____	In Case of Emergency Notify: Name: _____ Relationship: _____ Telephone No: (____) _____	
Home Address: _____ (Street) _____ (City) _____ (State) _____ (Zip) _____					
Social Security No: _____		Driver's License No: _____		State: _____	
Applicant's Telephone No: _____ (____) _____		DEPARTMENT OF CORRECTIONS USE ONLY Name of Department Personnel Requesting Clearance _____ _____ Printed Name _____ Telephone Number _____			
Cell Telephone No: _____ (____) _____					
REASON FOR SECURITY CLEARANCE: (Check One) <input type="checkbox"/> AA MEETING <input type="checkbox"/> CONSTRUCTION WORKER - Company: _____ <input type="checkbox"/> NA MEETING <input type="checkbox"/> MINISTRIES <input type="checkbox"/> MEDICAL EMPLOYEE <input type="checkbox"/> SOCIAL SERVICES WORKER <input type="checkbox"/> DIETARY EMPLOYEE <input type="checkbox"/> VOLUNTEER - Name of Program: _____ <input type="checkbox"/> COMMISSARY <input type="checkbox"/> GRANT PROGRAM - Name of Program: _____ <input type="checkbox"/> INTERN <input type="checkbox"/> OTHER (Explain): _____ <input type="checkbox"/> PUBLIC DEFENDER					
Applicant or Person Completing Application: I certify that the information above is true and correct to the best of my knowledge.					
Printed Name: _____		Signature: _____		Date: _____	

TO BE COMPLETED BY APPLICANT UNIT

Name of Person Performing Security Check: _____

Date Check Completed: _____

Information Verified: Yes _____ No _____	Able to Ascertain Identity: Yes _____ No _____	Security Clearance Granted: Date: _____	Security Clearance Rejected: Date: _____
Comments: _____			