



LOCAL BACKGROUND RECORDS CHECK

Date: _____

Name: _____

Date of Birth: _____

Social Security Number: _____

Address: _____

Criminal Record: _____

Traffic Record: _____

******RECORDS ARE FOR CITY OF GREENWOOD ONLY******

STATE OF INDIANA

COUNTY OF JOHNSON

Subscribed and sworn before me this ____ day of _____, 202__.

Notary Public

My Commission Expires



POLICE DEPARTMENT

186 Surina Way | Greenwood, IN 46143 | 317.882.9191