

**Hamilton County Sheriff's Office
Background Check Waiver**

I _____ consent to a background and criminal history check to be conducted by Investigator/ Officer _____ with Hamilton County Sheriff's Office. I am aware that the sole reason for this check is for the voluntary participation and admission to the Sheriff's Citizen's Academy and that Hamilton County Sheriff's Office Reserves the right to deny participation to any subject refusing to submit this background check or who submits and is found to have been convicted of or indicted for a criminal offense.

Applicant Signature _____ Date _____