

**DISTRICT OF COLUMBIA COURTS  
SECURITY CLEARANCE FORM**

<b>COMPANY NAME:</b>				
<b>PROJECT MANAGER:</b>				
<b>EMPLOYEE NAME</b>	<b>DATE OF BIRTH</b>	<b>SOCIAL SECURITY NUMBER</b>	<b>STATE</b>	<b>DRIVER'S LICENSE NUMBER</b>

<b>WORKSITE:</b>	
<b>JOB DESCRIPTION:</b>	

Date of Request: (Numbers Only)		<b>Metropolitan Police Department</b> <b>Washington, D.C</b> <b>Criminal History Request</b>		Social Security Number: (Numbers Only)	
Request Record of: (Last, First, Middle Name)					<b>Purpose of Request:</b> <input type="checkbox"/> Law Enforcement (non-employment) <input type="checkbox"/> Visas* <input type="checkbox"/> Employment/ Licensing* <input type="checkbox"/> Challenge*
Address:					
Sex: <b>Male</b>	Race:	Birthdate: (Numbers Only)	Place of Birth:		
Requesting Agency: <div style="text-align: center;">District of Columbia Courts</div>			Call-Back Number: <div style="text-align: center;">(202) 879-0496</div>		
Signature of Agent:				Badge No.:	<b>Method of Request:</b> <input type="checkbox"/> Mail <input type="checkbox"/> In Person <input type="checkbox"/> NLET <input type="checkbox"/> Telephone
IDENTIFICATION AND RECORDS DIVISION USE ONLY - (Check if applicable)					
<input type="checkbox"/> SUBJECT UNDER ARREST <span style="margin-left: 100px;"><input type="checkbox"/> CORRECT COLOR CODE</span>					
Request Received By:		Date and Time Received:		Date and Time Returned:	
<b>D.C. Code § 6-2276 IS QUOTED HERE FOR YOUR INFORMATION</b>  It shall be an unlawful practice, punishable by a fine of not more than three-hundred dollars (\$300), or imprisonment for not more than ten (10) days, or both, for any person to require the production of and arrest record or any copy, extract, or statement thereof, at the monetary expense of any individual to whom such record may relate. Such "arrest records" shall contain only listings of convictions and forfeitures of collateral that have occurred within ten (10) years of the time at which such record is requested. (Dec. 13, 1977, D.C. Law 2-38, Title II, § 266, 24 DCR 6038).  *I hereby authorize the release of my adult arrest record revealing convictions and forfeitures within the past ten (10) years.					
_____ Signature				_____ Date	
<b>RESULTS OF CRIMINAL HISTORY FILE SEARCH</b>  <div style="text-align: right;"> <input type="checkbox"/> Name Search     <input type="checkbox"/> Fingerprint Search         </div> <p>TO: Criminal History Users</p> <p>This request concerns information whose collection, dissemination, and use are conditioned and restricted by applicable federal and District of Columbia statutes, and policy of the Metropolitan Police Department. Continued assistance from this department is conditioned upon your strict adherence to these regulations.</p> <p>WARNING TO APPLYING AGENCIES: The Metropolitan Police Department does not guarantee either the accuracy of the record or that the individual whose record is furnished is actually the same individual whose record was requested. To obtain accuracy, the record of the Court involved should be examined. Positive identification can only be determined by comparable fingerprints. Records of arrests obtained from the Metropolitan Police Department as detailed on this form are for convictions and forfeitures for the past 10 years prior to the date of request of this record, exclusive of periods of imprisonment, if any. This record does not reflect any cases which may be currently pending before the Courts or cases where convictions have been set aside pending appeals.</p> <div style="text-align: right; margin-top: 20px;">CHIEF OF POLICE</div>					
Date of Arrest	Charge(s)			Disposition	
<b>Documents Released:</b> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> <input type="checkbox"/> Criminal History Record  <input type="checkbox"/> Prosecution Report         </div> <div> <input type="checkbox"/> Photograph  <input type="checkbox"/> Fingerprints         </div> <div> <input type="checkbox"/> Other: _____  <input type="checkbox"/> Other: _____         </div> </div>					

Date of Record Search: \_\_\_\_\_

Record Searched By: \_\_\_\_\_

Release Authorization: \_\_\_\_\_



## SECURE ACCESS REQUEST FORM

Name of Contractor/Vendor:

Secure Area Requiring Access:

Date of Work:

The following task(s) will be performed:

TASK (S):

The following contact is giving authorization / permission to enter the secure area on the above date:

\_\_\_\_\_

Signature

Date

*NOTE: Your area will be protected from dirt and dust, and will be cleaned by the contractor. Any furniture moved will be returned to its proper place. All Chambers require the presence of the Courts Security Officer or Administrative Service Personnel, during the scheduled task(s). The designated individual will remain with the contractor while work is in progress.*

\_\_\_\_\_  
[If Required] Signature of Court Security Officer upon completion of above referenced work:

\_\_\_\_\_  
Date

\_\_\_\_\_  
Time

\_\_\_\_\_  
Signature of Project Manager that above area task (s) was completed and area was cleaned.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Time



## CAMERA LETTER REQUEST FORM

Contracting Company: \_\_\_\_\_

Contractor Contact Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

The above listed Contractor is requesting approval to take photographs within the construction areas of the following project:

Project Name: \_\_\_\_\_

The Contractor understands that in order to take photographs within the DC Court buildings a "Camera Letter" must be issued to the Contractor and a copy of this letter must be carried at all times by any member of the Contractor's staff that will be taking photographs. The Contractor understands that no photographs of any person will be taken in or around any DC Court buildings.

*Please return this completed form to Project Manager.*