

FINGERPRINT APPLICATION FORM FOR OWNERS AND MANAGERS

McHENRY COUNTY LAW & GOVERNMENT/LIQUOR COMMITTEE
FINGERPRINT APPLICATION QUESTIONNAIRE

NAME: _____ DRIVER'S LICENSE #: _____
Last, First and Middle Initial (Maiden Name, if applicable)

LIST RESIDENCES FOR PAST FIVE (5) YEARS:

Current Address: _____
Address Phone # of years

Address Phone # of years

Address Phone # of years

Address Phone # of years

BIRTH DATE: _____ BIRTH PLACE: _____ SS#: _____
MM/DD/YYYY City/State

U.S. CITIZEN? _____ RACE: _____ HEIGHT: _____ WEIGHT: _____ EYE COLOR: _____ HAIR COLOR: _____

CURRENT EMPLOYER:

(Employer Name) (Address) (Phone)
POSITION: _____ HOW LONG EMPLOYED: _____

PREVIOUS EMPLOYER:

(Employer Name) (Address) (Phone)
POSITION: _____ HOW LONG EMPLOYED: _____

Have you ever been convicted of any criminal activity other than minor traffic violations? YES NO
If yes, please explain: _____

Have you ever had an individual, partnership or corporate liquor license revoked? YES NO
If yes, please explain: _____

Have you ever been manager of any establishment which held a liquor license? YES NO
If yes, where: _____ and when: _____

Are you currently an elected or appointed public official? YES NO

SUBMIT THREE (3) LETTERS OF CHARACTER REFERENCE (not relatives or employers)

In consideration of this application, the applicant hereby authorizes the County of McHenry and the McHenry County Sheriff's Office to conduct a criminal background search for the above-named applicant, and hereby releases and forever discharges the County of McHenry and the McHenry County Sheriff's Department and all of their departments, officers, officials, servants, agents, employees or insurers, charged or chargeable, with responsibility or liability from any and all claims, both legal and equitable in the performance of said criminal background search.

I swear that everything in the questionnaire is true and correct to the best of my knowledge.

Date

Signature of Applicant