CHARLES A. PENN
CHIEF OF POLICE

ARLINGTON COUNTY POLICE DEPARTMENT

ARLINGTON COUNTY COURTHOUSE
1425 NORTH COURTHOUSE ROAD
ARLINGTON, VA 22201
PHONE (703) 228-4292
ACPDrecords@arlingtonva.us

DAVID GIROUX
DEPUTY CHIEF

DARRIN CASSEDY
DEPUTY CHIEF

WAYNE VINCENT
DEPUTY CHIEF

LATASHA CHAMBERLAIN
DEPUTY CHIEF

Instructions for Requesting a Criminal History Record (LEO/Government Contractors)

1. **Complete Criminal History Record Information Form**
   - ☐ Complete first three lines of CHRI Form (page 2)
     - If subject has used any additional names, please include these in the AKA/Maiden block
     - In the address block, the current address
     - Include DOB and Social Security Number
     - Choose a Type of Request
       - Law Enforcement
       - Non-Criminal Justice
       - Otherwise by Law
   - ☐ Include Agency Name and Address
   - ☐ Sign and Date
2. **Include Release of Information**

***** Criminal History Records are not public information*****

*****Adult Arrest Records Only*****

☒ Criminal History Record Information Request
(Solicitud de Información de Antecedentes Criminales)

☐ Conviction Data Request
(Solicitud de Datos de Convicción)

Arlington County Police Department. Arlington, Virginia

Last Name, First Name, Middle Name (Apellido, Primer Nombre, Segundo Nombre)	**Race** (Raza)	**Sex** (Sexo)	**Date of Birth** (Fecha de Nacimiento)	**Place of Birth** (Lugar de Nacimiento)

AKA / Maiden (Alias)

Other D.O.B. used

Social Security Number
(Numero de Seguro Social)

Address
(Dirección)

Driver's License Number
(Numero de Licencia)

Other S.S.N. used

This request is made in accordance with Title 19.2, Chapter 23, §19.2-389, Code of Virginia, as amended, and any person misusing this information shall be guilty of a Class 2 misdemeanor. No dissemination of a criminal history record will be made to a noncriminal justice agency or individual if an interval of one year has elapsed from the date of arrest, no disposition of the charge has been recorded, and no active prosecution of the charge is pending.

This department allows individuals, per Virginia Code §9.1-132, to inspect their criminal history record for review and challenge purposes only. Employers, prospective employers, or their agents can not receive criminal history record information unless authorized by a state or federal statute or an executive order of the President or Governor to receive such information.

For the purpose of ascertaining its completeness/accuracy, I request to inspect a copy of such criminal history information concerning me maintained in the files of The Arlington County Police Department.

I understand the provisions of §9.1-136 Code of Virginia which states: "Any persons who willfully and intentionally requests, obtains, or seeks to obtain criminal history record information under false pretenses, or who willfully and intentionally disseminates or seeks to disseminate criminal history record information to any agency or persons in violation of this article or chapter 23 of Title 19.2, shall be guilty of a Class 2 misdemeanor."

Please be advised that pursuant to Virginia Code 19.2-392.13, this record may contain arrests, convictions, charges, or dispositions that have been sealed.

Name and Address of Requesting Agency

Type of Agency / Request

☐ Criminal Justice
☐ Non-Criminal Justice
☐ Otherwise by Law

Signature of Requester
(Firma)

Date of Request
(Fecha de Solicitud)

Please do not fill out below. ACPD use only.

Released By:

Date: