New

Renewal

ALAMEDA COUNTY SHERIFF'S OFFICE



DETENTION AND CORRECTIONS SECURITY CLEARANCE FORM

Purpose of obtaining security clearance Immate Services Santa Rita Jail Convacion or Employer Procurement Contract #: Agency / Company Name: Procurement Contract #: Are you an employee of an organization that has an AB109 or other county contract? Yes No Job Title: Supervisor: Reason for Visit: Personal Information Last: State:: COL/ID: State:: Contact: Phone #: Email: Ermail: Contact: Phone #: Phone #: #*** FAILING TO LIST AN ARREST OR CONVICTION MAY BE FASIS FOR DENIAL **** Over low any family members or parsonal friends in custody in the Alameda County Jail System? YES [] NO [] Mol [] Mol [] State: Agency / YES [] NO [] <t< th=""><th colspan="10">Please print or type all entries. Please complete this form in its entirety. Illegible or incomplete forms will be returned. Any additional information may be attached to the application</th></t<>	Please print or type all entries. Please complete this form in its entirety. Illegible or incomplete forms will be returned. Any additional information may be attached to the application									
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For Classification, email completed form to:ACSOSiteClearance@acgov.org