

Department of Public Safety Vermont **Criminal Information Center**

45 State Drive

Waterbury, VT 05671-1300

PUBLIC REQUEST FOR CRIMINAL CONVICTION INFORMATION					
PLEASE TYPE OR PRINT ALL INFORMATION CLEARLY FEE: \$30 PER REQUEST - NO PERSONAL/BUSINESS					
CHECKS Reply will be mailed in 5 – 7 working days - A SELF ADRESSED, STAMPED, RETURN ENVELOPE IS					
REQUIRED TO FACILITATE RETURN OF YOUR REQUEST					
WE ARE A VULI	NERABLE POPULATIO	NS AGENCY. OU	R AGENCY	CODE IS:	
NAME TO BE CHECKED: TYPE OR PRINT LEGIBLY					
LAST NAME			FIRST NAME		MIDDLE INITIAL
- 14 - 14 - 14 - 14 - 14 - 14 - 14 - 14					
DATE OF BIRTH (REQUIRED)		MALE	SOCIAL SECURITY NUMBER		
		FEMALE	LE (OPTIONAL)		
ALIAS NAMES (IF APPLICABLE)					
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	PERSONAL REVIE	W TEOD	FICN TDAY	VEL/ IMMIGRATION	MILITARY
	ADOPTION				PARDON
CHILD CUSTODY			☐ CIVIL COURT PROCEEDING ☐ PARDON ☐ LICENSING		
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