



**ROCKINGHAM COUNTY GOVERNMENT**  
**Office of 911 Emergency Communications**

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**Criminal History Request Form**  
**Municipal Employment – Purpose Code E-56**  
**Applicant Information**

\*Applicant Full Name: \_\_\_\_\_

\*Applicant Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

\*Race: \_\_\_\_\_ \*Sex: \_\_\_\_\_

\*Social Security Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

\*Position Applicant Applying For: \_\_\_\_\_

\*Agency Applying For: \_\_\_\_\_

**Requestor Information - Official use**

\*Requestor Name: \_\_\_\_\_

\*Requestor Title: \_\_\_\_\_

\*Requestor Signature: \_\_\_\_\_

\*Date of Request: \_\_\_\_\_

**DCI Operator Instructions**

1. Use QHNC Transaction
2. Purpose Code E-56 for city employment
3. ATN Field must be the Chief of Police or their SWORN representative
4. ATN2 Field indicate secondary dissemination (Town Manager, etc.)
5. Properly fill out DCIN form
6. Print results and have agency pickup results at RCEC
7. Complete and retain this form in the TAC files

\*DCIN Operator Name: \_\_\_\_\_

\*DCIN Operator Signature: \_\_\_\_\_ \*Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

*Required fields are marked with an asterisk \**