

**ALAPAHA JUDICIAL CIRCUIT
DISTRICT ATTORNEY
REQUEST TO RESTRICT RECORD**

For arrests after July 1, 2013

One (1) Date of Arrest per Request

SECTION ONE - APPLICANT INFORMATION

(Completed by Applicant)

Warrant #/Court #: _____

Name: _____

Date of Birth: _____ **Race:** _____ **Sex:** _____

Social Security Number: _____

Telephone Number: _____ **Email:** _____

Street Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Arresting Agency: _____ **Date of Arrest:** _____

Offense(s) Arrested for: _____

Were you convicted/found guilty/pleaded guilty/pleaded nolo? Yes _____ **No** _____

If so, what was your sentence? _____

Do you have a copy of the final disposition? Yes _____ **No** _____

If so, please include a copy of the disposition with your submission.

If you were given first offender probation, do you have a copy of the discharge order? Yes _____ **No** _____

If so, please include a copy of the discharge order with your submission.

Section One of this form must be completed in its entirety before request may be submitted to the Prosecuting Attorney's Office.

I request the record information (Date of Arrest and associated charges) described above pertaining to me be restricted from the record(s) of the arresting agency pursuant to the provisions of O.C.G.A. §35-3-37.

Signature: _____

Date: _____