

## Records Request Form

*The below named licensee is attempting to apply for an Oklahoma License authorized in Title 59 of the Oklahoma Statutes; specifically Title 59 OS § 1750 et seq. The licensee is mandated to provide records checks from their local jurisdictions - municipal and county as appropriate according to their place of residence- to the Council on Law Enforcement Education and Training as part of the licensing process. It is required of the applicant to ask that this form be completed by the municipal police department and sheriff's office of their jurisdiction. This form will not be accepted if completed by the municipal court clerk or the district court clerk.*

*To be completed by applicant:*

Applicants Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Please include any other name(s) you have gone by: \_\_\_\_\_  
\_\_\_\_\_

*This section to be completed by custodian of records where records are sought:*

Name of agency providing records: \_\_\_\_\_

- There are no court records associated with the applicants name.  
 Certified copy of record is attached or provided.

*Please Note: Any cost associated with providing certified copies shall be born solely by the applicant named above and remitted to the record provider by means acceptable to the court.*

Completed by:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Seal or Stamp (If applicable)