



# RENEWAL

# APPLICATION FOR SPECIAL PROCESS SERVER

(Certified private process servers are not employees of the court and may not in any way represent themselves as such. Private process servers may not, in any way represent themselves as "peace officers" unless they are peace officers. Approval as a certified private process server does not, in itself, confer peace officer status on the holder.)

Last Name	First	M.I.	DATE
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Mailing Address
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Street Address	Apartment / Unit#
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City	State	ZIP
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PHONE Home:	Work:	Cell:	E-mail:	Social Security No:
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Length of Time at Present Address:	Previous Address if less than one (1) year at present address:	How long at this address?
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Driver's License No:	Expiration Date:
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Date of Birth:	Height:	Weight:	Hair Color:	Eye Color:
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Education (include highest grade completed)
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Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
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Have you ever been or are you now employed by any law enforcement agency? YES <input type="checkbox"/> NO <input type="checkbox"/>	If Yes, give department, position and dates of:
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Have you ever been convicted of a felony or a misdemeanor involving fraud or dishonesty? YES <input type="checkbox"/> NO <input type="checkbox"/>	If Yes, explain:
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Have you ever been arrested or detained by any police authority or government official? YES <input type="checkbox"/> NO <input type="checkbox"/>	If Yes, explain:
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Have you ever been convicted, or pled guilty, no context, or nolo contendere to any criminal offense? YES <input type="checkbox"/> NO <input type="checkbox"/>	If Yes, explain:
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### EMPLOYMENT

Company	Phone: ( )
Address	Supervisor

Job Title:	How Long: Years Mos.
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### DISCLAIMER AND SIGNATURE

I hereby certify that all information contained in this application is true, complete, and correct to the best of my knowledge and belief. I understand that any falsification, misrepresentation, or omission in this application shall be reason for determining me ineligible for certification.

I authorize a background investigation and fingerprinting to be conducted to verify and determine if I have a criminal record.

Signature:	Date:
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