



Cobb County Judicial System Access Card Application

Agreement

The undersigned acknowledges receipt of a copy of the rules and regulations regarding unscreened access to the Cobb County Judicial Complex and agrees to comply with such rules and regulations, as amended. If the access card is lost or stolen, such fact must be reported within two (2) hours to the Cobb County Sheriff's Office at (770) 499-4607. The understand acknowledges this card is the property of the Cobb County Sheriff's Office and must be returned upon termination. The undersigned further understands that such access is a privilege and may be revoked at any time, with or without consent, and without further recourse of any kind.

Consent

I hereby authorize Cobb County Sheriff's Office to receive any criminal history record information pertaining to me, which may be in the files of any state or local criminal justice agency in Georgia.

Applicant Information

Last Name		First Name		Middle Name	
Date of Birth	Sex	Race	Social Security Nbr	Driver's License Nbr	DL State
Home Address			City	State	Zip Code
Home Phone Nbr		Work Phone Nbr		State Bar# (Attorneys Only)	
Applicant's Signature				Date Signed	
X					

Sponsoring Agency Information

Agency Name		Contact Name		Contact Phone Number	
Cobb Bar Association		Tricia Traeger		(770) 424-7149	
Applicants Position / Title				Start Date	
Attorney					
Access Card(s) Requesting - check box(s)					
District Attorney's Office	<input type="checkbox"/>	Public Safety Building	<input type="checkbox"/>	State Court Building	<input type="checkbox"/>
Juvenile Court Building <input type="checkbox"/>					
Comments (use this section to specify access requirements)					
Signature of Department Head/Elected Official				Request Date	
X					

Cobb County Sheriff's Office Use Only

Approved	Denied	Comments					
CCSO Authorizing Signature						Date Signed	
Jud Card Nbr	Access Group	Active Date				Delete Date	
St Ct Card Nbr	Time Code	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Active Date	Delete Date
	Reader Group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		