Arrest Notification Worksheet

| Notification Type: Record Found Subsequent Arrest Subsequent Disposition | n |
|---|----------|
| Date Notification Received Date Reviewed Reviewed By | |
| Applicant/Staff Name | |
| Position Title | |
| DOB SSN XXX-XX- | |
| □ Classified □ Certificated □ Volunteer □ Other | |
| Arresting Agency or Court | |
| Date of Incident/Court TOC (Type of Crime): Infraction Misdemeanor | E Felony |
| Penal Code(s) or Vehicle Code(s) | |
| Disposition Sentence | |
| Conviction Status: Misdemeanor Felony Dismissed | |
| Arresting Agency or Court | |
| Date of Incident/Court TOC (Type of Crime): Infraction Misdemeanor | □ Felony |
| Penal Code(s) or Vehicle Code(s) | |
| Disposition Sentence | |
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| Date of Incident/Court TOC (Type of Crime): Infraction Misdemeanor | □ Felony |
| Penal Code(s) or Vehicle Code(s) | |
| Disposition Sentence | |
| Conviction Status: Misdemeanor Felony Dismissed | |
| Continue to Next Page End of Notification | |
| Proceed with Employment: Yes No | |
| If no, submit NLI to: fingerprints@fcoe.org Date Sent: By: | |