

SALT LAKE COUNTY SHERIFF'S OFFICE

JAIL ACCESS APPLICATION

This form must be filled out accurately and completely to determine what access may be authorized. Incomplete or falsified information may result in the application being rejected. Submission of a form does not imply access will be approved. Application processing may take up to five (5) business days to complete.

	al Information	<u>11.</u>					
irst Name:		Middle Name:		Last Name:			
Maiden / Alias:							
Date of Birth:		Driver's Lic	cense #:	DL State:	Social S	Security #:	
Gender:	Eth	nicity:	Height:	Wei	gh <u>t:</u>	Hair:	Eyes:
Email:		Personal Conta	act Number:	Ho	me Address:		
mail: Personal Contact Number: ection 2: Access Reason / Employment:				City / State / ZIP:			
Reason Access Rea	quested:						
Employer:			Sup	ervisor:			
Contact Number:			Ema	ail:			
Sheriff's Office Sp	oonsor:			Sheriff's Office Division:			
Section 3: Backgr					_		
			ground check will be co	anducted Access to	the facility wil	1 he granted or	denied based on the
as part of the app	neation proces	s, a crimmar backg	round check will be ec	inducted. Access to	the facility wil	i be granted of	defiled based off the
ection 5: Signatu	re:		packground check will	be performed by Sh	eriff's Office	personnel to ve	rify the information
ection 5: Signatu y signing below y pove.	re:		eackground check will	be performed by Sh	eriff's Office _J	personnel to ve	rify the information
ection 5: Signatu y signing below y pove.	re:		eackground check will ***JAIL SECURITY D		Date:	personnel to ve	rify the information
ection 5: Signatu y signing below y pove.	re:			DIVISION USE ONL	Date:	personnel to ve	rify the information Yes / No
ection 5: Signatu y signing below y pove. Signature:	re: /ou consent to	and understand a b	***JAIL SECURITY D	DIVISION USE ONL	Date:	personnel to ve	
y signing below yoove. Signature: Section Section 1 Section 2	re: /ou consent to	Check SO# CHQL	***JAIL SECURITY D	DIVISION USE ONLY ASU	Date: Y*** Decisions	personnel to ve	
y signing below y pove. Signature: Section Section 1 Section 2 Section 3	re: /ou consent to	Check SO# CHQL DLQL	***JAIL SECURITY D	ASU Sign Secu	Date: Y*** Decisions Deputy ature prity Lt.	personnel to ve	
y signing below yoove. Signature: Section Section 1 Section 2 Section 3 Section 4	re: /ou consent to	Check SO# CHQL DLQL QSWL	***JAIL SECURITY D	ASU Sign Secu	Date: Y*** Decisions J Deputy ature urity Lt. ature	personnel to ve	
y signing below yoove. Signature: Section Section 1 Section 2 Section 3 Section 4 Section 5	re: /ou consent to	Check SO# CHQL DLQL QSWL OTRKL	***JAIL SECURITY D	ASU Sign Secu Sign App	Date: Y*** Decisions J Deputy ature urity Lt. ature eal Date	personnel to ve	
y signing below y bove. Signature: Section Section 1 Section 2 Section 3 Section 4 Section 5 Date Received	re: /ou consent to	Check SO# CHQL DLQL QSWL OTRKL QH2	***JAIL SECURITY D	ASU Sign Secu Sign App Capt	Date: Y*** Decisions J Deputy ature urity Lt. ature eal Date ain	personnel to ve	
y signing below y bove. Signature: Section Section 1 Section 2 Section 3 Section 4 Section 5	re: /ou consent to	Check SO# CHQL DLQL QSWL OTRKL	***JAIL SECURITY E Result	ASU Sign Secu Sign App Capt Sign	Date: Y*** Decisions J Deputy ature urity Lt. ature eal Date	personnel to ve	
y signing below yove. Signature: Section Section 1 Section 2 Section 3 Section 4 Section 5 Date Received Date Completed	Complete	Check SO# CHQL DLQL QSWL OTRKL QH2 QW1	***JAIL SECURITY E Result ***ADMINIST	ASU Sign Secu Sign App Capt Sign Sign RATION USE***	Date: Y*** Decisions J Deputy ature urity Lt. ature eal Date tain ature		Yes / No
y signing below y pove. Signature: Section Section 1 Section 2 Section 3 Section 4 Section 5 Date Received Date Completed Access Leve	Complete	Check SO# CHQL DLQL QSWL OTRKL QH2	***JAIL SECURITY E Result ***ADMINIST Term	ASU Sign Secu Sign App Capt Sign Sign RATION USE***	Date: Y*** Decisions J Deputy ature urity Lt. ature eal Date ain		
signature: Section Section Section 1 Section 2 Section 3 Section 4 Section 5 Date Received Date Completed Access Leve Temporary / Tempor	Complete	Check SO# CHQL DLQL QSWL OTRKL QH2 QW1	***JAIL SECURITY E Result ***ADMINIST Term Days:	ASU Sign Secu Sign App Capt Sign Sign RATION USE***	Date: Y*** Decisions J Deputy ature urity Lt. ature eal Date tain ature		Yes / No
Section Section 1 Section 2 Section 3 Section 4 Section 5 Date Received Date Completed Access Leve Temporary / Te	Complete	Check SO# CHQL DLQL QSWL OTRKL QH2 QW1	***JAIL SECURITY E Result ***ADMINIST Term Days: 1 Year	ASU Sign Secu Sign App Capt Sign Sign RATION USE***	Date: Y*** Decisions J Deputy ature urity Lt. ature eal Date tain ature		Yes / No
section 5: Signatury signing below yoove. Signature: Section Section 1 Section 2 Section 3 Section 4 Section 5 Date Received Date Completed Access Leve Temporary / To	Complete	Check SO# CHQL DLQL QSWL OTRKL QH2 QW1	***JAIL SECURITY E Result ***ADMINIST Term Days:	ASU Sign Secu Sign App Capt Sign Sign RATION USE***	Date: Y*** Decisions J Deputy ature urity Lt. ature eal Date tain ature		Yes / No

Notes: