

# REQUEST TO EXPUNGE ARREST RECORD

O.C.G.A. 35-3-37(d)

## SECTION (1) ONE - APPLICANT INFORMATION

(to be completed by requester)

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Race \_\_\_\_\_ Sex \_\_\_\_\_

Social Security Number \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Arresting Agency: \_\_\_\_\_

Date of Arrest \_\_\_\_\_

Offense(s) Arrested For: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**(NOTE: Arresting or Prosecuting Agencies may require the use of separate forms for each date of arrest to be expunged.)**

**Sections One and Two of this form must be completed in their entirety before request may be submitted to the Prosecuting Attorney's Office.**

I request the arrest record information described above pertaining to me be expunged from the record(s) of the arresting agency pursuant to the provisions of O.C.G.A. 35-3-37(d).

Signature \_\_\_\_\_

Date \_\_\_\_\_

O.C.G.A. 35-3-37(d)(1) provides in part that "An individual who was: (A) Arrested for an offense under the laws of this state but subsequent to such arrest is released by the arresting agency without such offense being referred to the prosecuting attorney for prosecution; or (B) After such offense referred to the proper prosecuting attorney, and the prosecuting attorney dismisses the charges without seeking an indictment or filing an accusation may request the original agency in writing to expunge the records of such arrest..."

**SECTION (2) TWO - ARREST INFORMATION**  
**(to be completed by arresting agency)**

Date Request Received \_\_\_\_\_

Applicant's State Identification Number (SID) GA \_\_\_\_\_

Arresting Agency Name \_\_\_\_\_

Arresting Agency ORI Number GA \_\_\_\_\_

Case/Citation/Docket Number: \_\_\_\_\_

Date of Arrest: \_\_\_\_\_

Arrest appears on Georgia and/or FBI criminal history record? \_\_\_ Yes \_\_\_ No  
If arrest does not appear on either state or federal record, expungement can not be processed and therefore there is no need to forward request to GCIC.

Arrest Charges: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Disposition of Arrest: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Disposition appears on Georgia criminal history record? \_\_\_ Yes \_\_\_ No  
If No, official documentation containing disposition information is attached for processing.  
If official documentation is not available, please provide explanation and request for exception in Prosecutor's Comments. (Without a disposition on file, official documentation, or request for exception, request can not be processed)

Prosecuting Attorney/Court Case Referred To: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Name and Title of Official Completing Form

\_\_\_\_\_  
Signature of Official Completing Form

**SECTION (3) THREE - PROSECUTING ATTORNEY**  
*(to be completed by prosecuting attorney)*

Date Request Received \_\_\_\_\_

Judicial Circuit/County \_\_\_\_\_

Prosecuting Agency ORI Number GA \_\_\_\_\_

District Attorney/Solicitor General \_\_\_\_\_

Prosecutor Assigned to Case \_\_\_\_\_

Case/Citation/Docket Number \_\_\_\_\_

**Please select one of the following actions**

\_\_\_\_\_ Expungement Meets Statutory Requirements

\_\_\_\_\_ No Information Available; Expungement Forwarded Without Objection

\_\_\_\_\_ No Information Available at Prosecutor's Office; Returned to Arresting Agency for Further Research. **DO NOT FORWARD EXPUNGEMENT FORM TO GCIC**

\_\_\_\_\_ Expungement Does Not Meet All Statutory Requirements. **DO NOT FORWARD EXPUNGEMENT FORM TO GCIC.**

Prosecutor Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Prosecutor

\_\_\_\_\_  
Date