SALT LAKE CITY DEPARTMENT OF AIRPORTS EMPLOYEE REQUEST FOR CHRC/STA RESULTS

Salt Lake City Department of Airport	S

Badge #	Person ID #

OVERVIEW								
This form may be used to transfer STA results to and from SLC. SLC does not accept CHRC results, but will transfer CHRC results to another airport or company.								
SECTION 1								
EMPLOYEE INFORMATION	Incomplete forms	Incomplete forms will not be accepted.						
Last Name	First Name	First Name		Middle Name				
Social Security Number	Date of Birth (MM	Date of Birth (MM/DD/YYYY) / "" /			Date of Request			
☐ I give blanket authorization for SLC Airport to forward future requests of my CHRC and/or STA results to any airport making a request for the documentation. Initials X								
☐ I request a copy of my criminal history records check results be provided to the airport/company listed below. My signature indicates I have authorized this request.								
Signature						Date		
SECTION 2 ORIGINATING AIRPORT OR COMPANY (FROM)								
			t of Contact (POC) N	Contact (POC) Name				
POC E-mail Address	POC Fax Number							
SECTION 3 RECEIVING AIRPORT OR COMPANY (TO)								
Airport or Company			Point of Contact (POC) Name					
POC E-mail Address			POC Fax Number					
SECTION 4 ACCESS CONTROL USE ONLY								
Copy of results to: □Employee □ □	ployee							
CHRC Date	CHRC Case No	RC Case No STA Approved Date				ed Date		