

# STATE OF NORTH CAROLINA

In The General Court Of Justice

## IN THE MATTER OF

Full Name And Address Of Applicant For Employment Or Certification (type or print)

## LAW ENFORCEMENT APPLICATION FOR VERIFICATION OF EXPUNCTION UNDER G.S. 15A-145.4, 15A-145.5, OR 15A-145.6

G.S. 15A-145.4, 15A-145.5, 15A-145.6, 15A-151

Drivers License No.	State	Race	Sex	Date Of Birth	Full Social Security No.
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**NOTE:** If the applicant's name, drivers license information, or social security number were different at the time of the prior expunction or the charge leading to the expunction, list the prior information in the fields below:

Former Name (Last, First, Middle)	Former Drivers License No.	State	Full Former Social Security No.
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### APPLICATION FOR VERIFICATION OF EXPUNCTION

Pursuant to G.S. 15A-151, the undersigned hereby requests a search of the confidential records of expunction maintained by the Administrative Office of the Courts (NCAOC), for the purpose of determining whether the applicant named above previously has been granted an expunction pursuant to G.S. 15A-145.4, 15A-145.5, or 15A-145.6.

The undersigned hereby certifies that:

- The applicant named above (check one)
  - has applied for employment with the law enforcement agency identified below, which is a State or local law enforcement agency of the State of North Carolina, and this request is made only for the purpose of an employment decision concerning the applicant.
  - is an applicant for certification by the (check one)
    - North Carolina Criminal Justice Education and Training Standards Commission
    - North Carolina Sheriffs' Education and Training Standards Commission
 and this request is made only for the purpose of the Commission's determination concerning that certification.
- The undersigned has been authorized by the hiring authority of the law enforcement agency or the Commission indicated above to make this request on behalf of the agency or Commission, as communicated previously to the NCAOC.

Date	Name Of Requester (type or print)	Agency
Signature Of Requester		<input type="checkbox"/> NC Criminal Justice Education and Training Standards Commission <input type="checkbox"/> NC Sheriffs' Education and Training Standards Commission <input type="checkbox"/> Other: _____

### ACKNOWLEDGED BEFORE ME

(You must provide: self-addressed stamped envelope, ORI number, and address below at which verification will be returned to requester).

Date	Name Of Person Authorized To Administer Oaths (type or print)	Agency Name And Address (type or print)
<input type="checkbox"/> Notary	Signature Of Person Authorized To Administer Oaths	
<b>SEAL</b>	Date My Commission Expires	County Where Notarized

Deputy CSC    Assistant CSC    Clerk Of Superior Court    Magistrate

ORI Number:

### CERTIFICATE OF VERIFICATION

I have searched the confidential file of persons granted an expunction in North Carolina and certify that:

- there is no record under the name of the applicant for an expunction under G.S. 15A-145.4, 15A-145.5 or 15A-145.6.
- there is a record under the name of the applicant for an expunction under G.S. 15A-145.4, 15A-145.5 or 15A-145.6, and it is attached to this form.

Date	Name Of Records Officer (type or print)	Signature Of Records Officer
	<b>Ashley M. Naleimaile</b>	

(Over)

## INSTRUCTIONS

**NOTE TO REQUESTER:** *Read these instructions carefully. Records of expunctions are some of the most confidential records in the court system. The Administrative Office of the Courts (NCAOC) will not disclose information about expunctions except in strict compliance with G.S. 15A-151(a) and 15A-152. If the NCAOC receives an application that fails to comply with these instructions, there may be no response to the application.*

1. If you have any questions about this application or its completion, please consult your agency's or commission's legal counsel.
2. You may not strike through or modify any item on Side One. All of the information and statements on Side One are required for a valid application.
3. Write clearly and legibly. Applications with illegible information may not receive a response. If you wish to submit a typed application, this form is available electronically on the NCAOC's website at [www.nccourts.gov/documents/forms](http://www.nccourts.gov/documents/forms). In the "Contains" field, enter the number of this form, AOC-CR-280. Searching by the form number will provide you with a link to a fillable PDF version of this form.
4. Provide complete information in every field on Side One. Identifying information such as drivers license information, date of birth, and social security number is critical to this application. If the staff of the NCAOC is unable to verify that a particular record of expunction pertains to the applicant, the NCAOC will respond that "there is no record of expunction" in order to avoid the risk of disclosing the expunction record of another person.
5. This application may be submitted **only** for the purposes listed in G.S. 15A-151(a)(4) through (a)(6).
6. **DO NOT** call the NCAOC to ask about the status of this application once submitted. In order to avoid improper disclosure of information about expunged cases, the staff of the NCAOC will not discuss this application with anyone over the phone. The NCAOC will not even acknowledge the receipt of this application. **There will be no exceptions.** The only response to this application will be by U.S. mail, using your self-addressed stamped envelope after completion of the NCAOC search of the expunction records.
7. Send all applications by U.S. Mail to:

**NC Administrative Office of the Courts  
Court Services  
Attn: Records Officer  
PO Box 2448  
Raleigh, NC 27602**